Race Waiver

In consideration of you accepting my entry and permitting me to attend or permitting me to participate therein, I intend to be legally bound hereby for myself, my heirs, executors or administrators, waive and release all rights and claims for damages I may now or in the future have against Eclipse Multi-Sport, Fourteen Holy Helpers Parish, the organizers of the Mathletes 5K, their representative(s), Venue, Volunteers, Agents, Sponsors, Members or Vendors for any and all losses and injuries suffered from competing in, or attending said event. I give my permission to publish in a newspaper or any mass media, any photographs, slides or videotape in which I appear while participating in any Eclipse Multi-Sport activity. I understand that walking or running in a road race is potentially hazardous activity. I should not participate unless I am medically able and properly trained. I also understand the my entry fee is nonrefundable. A parent must sign if an entrant is under 18 years of age. This is to certify that my child had permission to compete in the events, are in good physical condition, and the event officials may authorize necessary medical treatment. By signing below I agree to these terms.

Signature: _____

Date: _____

If under 18, the signature of a parent or guardian is **REQUIRED**

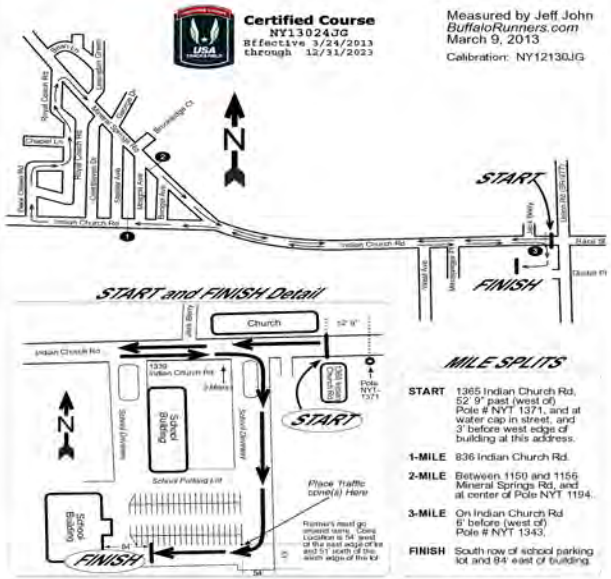
Parent/Guardian

Signature: _____

Date: _____

14 Holy Helpers School 5K

West Seneca, NY



In Memory of
Mrs. Cynthia Frank
9/8/1955 ~ 7/22/2012
Parishioner ~ Graduate ~
Dedicated Teacher for 35 Years

Cindy Frank was a long time junior high mathematics teacher at Fourteen Holy Helpers School until she lost a short but valiant battle with a very aggressive form of cancer in the summer of 2012. Her 35 year commitment to providing her students the best math foundation possible is being honored not only by this run, but also by the presentation of student scholarships in her name. The proceeds from this run will benefit not only the scholarship fund, but also the parish and the Buffalo "Hospice Angels Fund".

www.MathletesCindyFrank5K.org

MATHLETES 5K

7th Annual Mathletes Cindy Frank Memorial 5K Run

ECLIPSE MULTI-SPORT

HOSPICE Angels FUND

FOURTEEN HOLY HELPERS PARISH 150th ANNIVERSARY 1864 - 2019

"I just had a piece of "Pi" for lunch & now I'm feeling all irrational"

Saturday
05.04.19
West Seneca, NY

Register Online at
www.eclipsemultisport.com

Cindy Frank MATHLETES 5K Memorial Run

~ **Email:** 14hhmathletes5k@gmail.com ~ **Website:** www.MathletesCindyFrank5K.org ~

Seventh Annual Mathletes Cindy Frank Memorial 5K Run & 1K Walk

* Saturday - 05.04.19 * 1345 Indian Church Road,West Seneca, NY *

*** Runner Start time: 9:00 am * Walker Start time: 9:15 am ***

Online Registration Closing Date: Thursday, May 2nd, 2019 @ 11:59 pm US/EST

Registration available online at www.*eclipsemultisport.com*

Like Us on Facebook at www.facebook.com/MathletesCindyFrankMemorial5KRun

Registration Pricing

Early Registration Pricing (includes Friday 5/3/19 5-7pm)
Adult 5K Run (15 and over - RUNNERS ONLY) - $25
Youth 5K Run (14 and under - RUNNERS ONLY) - $20
1K Walk - $15

On-Site Registration Pricing (Sat 5/4 starting at 7:30AM)
Adult 5K Run (15 and over - RUNNERS ONLY) - $30
Youth 5K Run (14 and under - RUNNERS ONLY) - $25
1K Walk - $20

** Trophies to Overall Top Male & Female Finishers*
** Awards in each age group and recognition to Top 3 Finishers in each group: 5-10, 11-14, 15-19, 20-24, etc and up to 75+*

** Pre & Post Race Party includes: - Canned Beverages - lite breakfast/lunch - Raffles/Theme Tray - Music - Bounce Houses*

Ample Parking at the West Seneca Town Highway Department Lot on 39 South Avenue off of Union Road

Pre-Registration Pickup @ 14 Holy Helpers Parish Hall - 1339 Indian Church Road - West Seneca, NY - 14224
Friday, May 3rd, 2019 from 5:00pm to 7:00pm

Scan code to the right for a link to online registration

Make Checks Payable To:
Fourteen Holy Helpers
c/o Bill Frank, Mathletes 5K
32 Randy Way
Cheektowaga, NY 14227

USATF CERTIFIED COURSE 2019 SANCTIONED EVENT

Sanction # 19-04-043
Certified Course # NY13024JG

Please cut off and return bottom portion w/ payment - Please be sure to sign the Waiver

[ ] I am unable to attend, but please accept my donation of $ _____ Day of Race Age: _____ Date: _____

Last Name: _____ First Name: _____ ☎Phone: ( ) _____

Street Address: _____ Date of Birth: _____ Gender: _____

City: _____ State (Province): _____ Zip (Postal) Code: _____

E-mail Address: _____

Race Type (select one): **[ ] Adult 5K Run $25** (15 and over - RUNNERS ONLY) - *(day of race $30)*

[ ] Youth 5K Run $20 (14 and under - RUNNERS ONLY) - *(day of race $25)* **[ ] 1K Walk $15** (any age) - *(day of race $20)*

Shirt Size (Unisex Adult Sizing) (circle one): S M L XL XXL XXXL
Shirt Type (circle one): Runner Shirt or Cotton T-Shirt

(BR)

Participants must sign waiver on back of application TOTAL Enclosed: $_____