

# 15th Annual Crouse 5K Challenge

**Date: Friday, May 9, 2014**

**Time: 5K- 6:00 PM  
1/2 Mile Fun Run- 7:00PM  
Tot Sprint- 7:15 PM**

**Pre-register by: 5/5/2014**

**Entry fees:**

- \$15 -5K pre-register
- \$20- 5K race day
- \$10- GCS Student Rate-**NO SHIRT**
- \$3- 1/2 Mile Fun Run pre-register (8 & under)
- \$5 -1/2 Mile Fun Run race day
- Tot Sprint **FREE** (5 and under)

US Track & Field  
Certified Course  
NY-04009AM

Post Race Party

Music by Don Rogers  
Awards, Door Prizes, Food  
and Beer

**Registration & Packet pick-up  
Starts 4:30 PM**

**Gowanda American Legion  
100 Legion Dr., Gowanda, NY 14070  
(behind Gowanda Fire Hall)**

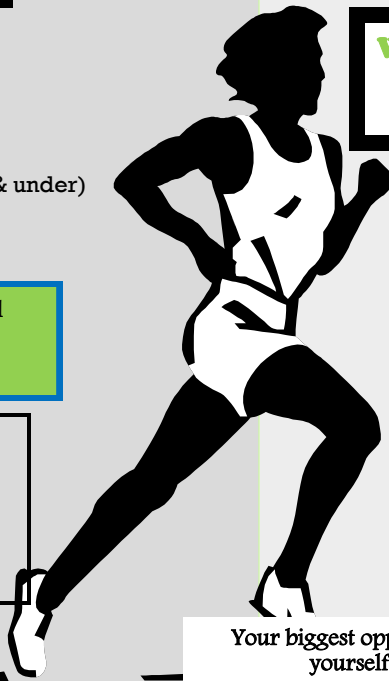
**Proceeds Benefit:**

**GCS Dennis Crouse, Sr. Scholarship  
Blue By U... (Youth Track Club)  
Gowanda Sports Boosters**

**PRIZES**

1st, 2nd, 3rd  
Overall Male/Female  
1st, 2nd, 3rd  
Male/Female Age Groups:  
7-8, 9-10 11-12, 13-14, 15-  
16,17-18, 19-24, 25-29,  
30-34, 35-39, 40-44,  
45-49, 50-54, 55-59,  
60-64, & **GOLDEN!**

**WNY Finish Line  
Services**



Your biggest opponent is  
yourself!

**Event Sponsors:**

**Valley Pharmacy  
Gernatt Asphalt Products  
Designer Pools  
Gowanda American Legion  
Shop 'n Save-The Fort Family**

**Mentley Funeral Home  
Crowell Home & Auto Supply  
Artista Salon  
Gowanda Rehabilitation &  
Nursing Center  
Gowanda Harley Davidson**

**Website: <http://gtownfit.com>  
Jennifer Gernatt- (cell 860-8782)  
Email-[jengernatt@gmail.com](mailto:jengernatt@gmail.com)**

Mail entry form and check to:

**Jennifer M. Gernatt**  
Crouse 5K Challenge  
PO Box 172  
Collins, NY 14034

**ENTRY FORM**

FULL NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ CITY, STATE & ZIP \_\_\_\_\_

**Circle One:**  
**5K Run   5K Walk   1/2 M**

**5K Shirt Size   GCS RATE NO SHIRT**

**XS   S   M   L   XL   XXL**

Sex: **M   OR   F**   Age on race day \_\_\_\_\_

**Declaration and Release:** In consideration of you accepting my entry and permitting me to attend or participate therein, I intend to be legally bound for myself, my heirs, executors and administrators to waive and release any and all rights and claims for personal injury or other damages I may now or in the future have against the sponsors of this event. Gowanda Area Chamber of Commerce, NYSDOT, Village of Gowanda, Race Committee and their representatives, agents or assigns for any and all personal injuries, damages, losses and injuries suffered from or incurred by competing in or attending this event.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature of parent or guardian if under 18 years of age. \_\_\_\_\_

Date \_\_\_\_\_