

RUN FOR YOUR LIFE

RACE ENTRY FORM

Stockton Springs Ambulance Service

Sponsored by Stockton Springs Community Builders

217 Main St, Stockton Springs, ME 04981

Office 207.567.3404 Emergency-911

Proudly serving the communities of Stockton Springs and Prospect since 1964

When: Saturday, July 29, 2023
Race Day Registration begins at 8:00 A.M
5K starts at 9:00 AM

Where: Stockton Springs Town Office, 217 Main Street, Stockton Springs, Maine

Why: Proceeds benefit the Stockton Springs Ambulance Equipment Fund
5K Race and Public Safety 5K (Police, Fire, EMS, Dispatch)
\$20.00 per person if registered (postmarked) by July 14th
\$35.00 per person if registering the day of the race or after July 14th
\$50.00 per family (Applies to families of four or more.)
Commemorative T-Shirt for the first 25 registrants

Awards: 5K Runners 1st Male/Female Finishers
12 & Under/13-17/18-29/30-39/40-49/50-59/60+

For more information: Contact Jen Skala at 207-949-4323 or e-mail at jpskala@gmail.com
Registration forms are available at Stockton Springs Town Office, www.sub5.com or online **Jen Skala**

Mail entry forms to: Stockton Springs Ambulance Run For Your Life
217 Main St, Stockton Springs, ME 04981
Make Checks Payable to: Stockton Springs Ambulance, Memo Line: Run For Your Life

One entrant per form I am unable to participate, but would like to donate \$ _____

Name: (Please Print) _____ Gender: _____ Age on race day: _____

Team Name (if member of a team) _____ Circle T-Shirt Size: **Youth** XS S M **Adult** S M L XL
Commemorative T-Shirt for the first 25 registrants

Address: _____

Phone: _____ E-mail: _____

Check one please: **5K:** _____ **Public Safety 5K (Police, Fire, EMS, Dispatch):** _____

Runners Signature: _____ Date: _____

Parent or Guardian Signature: (if under 18) _____

Entry Release: By signing above, you understand and agree to the following: I know that running/walking a road race is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by the decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running this event including but not limited to falls or injuries caused by weather conditions, traffic, and road conditions, in the consideration of my entry acceptance. I, for myself and anyone entitled to act on my behalf waive and release all race sponsors, Town of Stockton Springs, Stockton Springs Ambulance, race officials and all representatives and successors from all claims or liabilities arising out of my participation in this event. **Photo Release:** By signing above, I hereby grant the Stockton Springs Ambulance Run For Your Life 5K and 12K the right to take photographs of me/my child in connection with the Stockton Springs Ambulance Run For Your Life. I agree that the Stockton Springs Ambulance Run For Your Life, all sponsoring or co-sponsoring companies, and the staff volunteers, and personnel associated with the event may use, reproduce, and/or publish photographs that may pertain to me/child – including my/my child’s image and likeness without compensation. I understand that that this material may be used in various publications for any lawful purpose, which can include publicity, illustration, advertising, and Web content.

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“To Serve and Save”