



8th Annual

Founders Day 5K Run/Walk

In cooperation with the

Capon Bridge Fitness Center

caponbridgefitnesscenter@gmail.com



Sunday, September 27th, 2015 8:00 AM

Capon Bridge Community Center, 3223 Northwestern Pike

All Ages - Kids - Welcome!

Start and Finish will be at the
Capon Bridge Community Center
 3223 Northwestern Pike (Route 50)
 Capon Bridge, WV

Times for events:
8:00am Start
9:00am Awards

Contact:
 Danielle Popp (304-856-1690)
 or Stacey Powell (304-856-1005)



Entry Fees

Before Sept 15, 2015
 \$10.00 No Shirt
 \$15.00 with Shirt

After Sept 15 - Day of Race
 \$15.00 No Shirt
 \$20.00 with Shirt

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Last Name		First Name		Age	Sex		
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Street Address (include apartment number)				Check or Cash Only			
-----				Make all checks payable to			
City				Capon Bridge Founders Day			
State		Zip		& mail to: Danielle Popp, 216			
-----		-----		White Pine Ridge Rd, High			
Telephone Number		Email address		View, WV 26808 or			
-----		-----		Stacey Powell, PO Box 338			
-----		-----		Capon Bridge, WV 26711			

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and understanding these facts, I, for myself and anyone acting on my behalf, waive, and release, the members of the Capon Bridge Founders Day Committee, the Capon Bridge Ruritan Club, the Capon Bridge Fitness Center, individuals conducting the race, and all other sponsors and their representatives from all claims and liabilities of any kind arising out of my participation of this event even though that liability might arise out of negligence or carelessness on the part of persons named in this waiver. I understand and agree to abide by the insurance restrictions, which prohibit the use of portable sound systems, wheel conveyances (excluding racing wheelchairs) but including skateboards, roller skates or blades, bicycles, etc. Illegible applications may result in disqualification. My entry in this race authorizes the Capon Bridge Founders Day Committee, the Capon Bridge Ruritan Club, the Capon Bridge Fitness Center, or sponsors to record the race and its results in any medium and use those recordings in its discretion for any purpose. The Capon Bridge Founders Day Committee, organizers, or sponsors in no manner guarantee the accuracy of recording or reporting of results of any race.

Signature _____

Signature by Parent/Guardian (under 18) _____