

SECOND ANNUAL TRUMBULL COUNTY FOP #137

RUN WITH THE DEPUTIES 5 K DASH

1 Mile walk, 1/4 Mile Kids Fun Run around Court House

Proudly Supports the USO of Northern Ohio



Date: June 21, 2014 9:00 AM
Where: Downtown Warren - Courthouse Square
Registration: Online Registration: www.gopherarun.com
 Race Day Registration 7:30-8:45 AM, 8:45 Walk, 9:45 Kids Run
Cost: \$15.00 Race Day Registration \$17.00, Walk \$10.00, Kids Free
Awards: All runners and Walkers received a t-shirt, All Kids receives medals
 Top four overall men and women
 Top four each Police, Fireman, Military, Veteran and TCSO member
 Only one award per winner
There will be a team competition consisting of 5 runners.
Cross Country format will be used in determining team winners.
Medals to top three team 2 Divisions, one open and one high school.

Age Groups: 14 & Under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54
 55-59, 60-64, 65-69, 70 plus Top 3 in each, All Groups,

Information: www.gopherarun.com or Call Donald Hyde at 330-240-3750
 or e-mail DHYDE454@Aol.com

"Proceeds Support USO Northern Ohio"

First Name _____ Last Name _____ Age _____

Address _____ City _____ State _____ Zip _____

Phone _____ email address _____

Sex M F (Circle) T shirt size S M L XL (Circle)

Team Name _____ Team Captain _____

Which Division Open High School Police _____ TCSO _____

(please check) 5K Walk Kids Fire _____ Veteran _____

Military _____ Branch _____

Team Members _____ All team members must pay the entry fee

and also fill out an entry form.

Team Members also eligible

for individual awards

In consideration of acceptance of the entry of this person named above, I the undersigned, on behalf of myself, my heirs, executors, administrators, and assigns, hereby waive any and all claims for damages or claims of any nature which arise, either directly or indirectly, out of participation in this event against all race, sponsors, promoters, and race officials and their representatives, I acknowledge that I am aware of the risks involved in participation in such and event and represent to the sponsors that the participant is physically fit and sufficiently trained to participate in the event.

Signature _____ Date _____

Parent signature if under 18 _____ Date _____

Register online at www.gopherarun.com or return this form to
FOP #137 454 Laurelwood Warren, OH 44484. Make Checks payable to: **FOP #137**