

27th ANNUAL

STAR TRAX 5K VIRTUAL RUN

SATURDAY, AUGUST 1, 2020

SPONSORED BY: THE SALEM X-TRA MILE CLUB, INC.

TO BENEFIT THE SALEM HIGH SCHOOL CROSS COUNTRY AND TRACK AND FIELD PROGRAMS

(The Salem X-Tra Mile Club, Inc., is not responsible for any lost or stolen items.)

TIME: You run the race anytime you want from July 26 – August 1 and post your time at a link given to you after completing online registration. If you do mail in registration, the link will be emailed to you. Results must be posted by midnight of August 1st.

LOCATION: You run the race anywhere you want as long as it's a 5K (3.1 miles).

NON-REFUNDABLE ENTRY FEE: \$10.00 ENTRY FEE (I don't need a shirt. I'd like the club to keep the whole entry fee.)
\$15.00 ENTRY FEE INCLUDES A SHIRT (Will be shipped if you can't pick it up.)

ONLINE REGISTRATION: www.gopherarun.com
Online Registration Ends On 7/30/2020.

AWARDS: No awards since this is virtual.

MAKE CHECKS PAYABLE TO: THE SALEM X-TRA MILE CLUB, INC.

ENTRIES SHOULD BE MAILED TO: P. O. Box 122

Salem, OH 44460

FOR ADDITIONAL INFO CALL: Jeff Christopher - (330) 853-8835

John Scheets - (234) 567-1272

FOR REGISTRATION QUESTIONS: Lori Wilson: (330)301-0890 (after 5:00)

OR E-MAIL: info@startrax5k.com WEBSITE: www.startrax5k.com

**Scoring & Online
Registration Provided By:
www.gopherarun.com**

PHOTOCOPIES OF THIS FORM ARE ALSO ACCEPTED PLEASE PRINT CLEARLY



2020 STAR TRAX 5K VIRTUAL RUN REGISTRATION FORM

NAME: _____

MALE: _____ FEMALE: _____ (Check One)

ADDRESS: _____

AGE DAY OF RACE: _____

CITY, STATE, ZIP: _____

T-SHIRT SIZE (Circle One): YM YL S M L XL XXL
NO SHIRT

PHONE: _____

DID YOU RACE LAST YEAR? YES NO (Please circle)

EMAIL: _____ (required so that we can send you a link to post results)

ENTRY FEE: (\$10.00 – No shirt needed) _____ ENTRY FEE: (\$15.00 – Includes shirt) _____

Would you like to make an extra monetary donation to support the Salem Cross Country and Track and Field Programs. Amount _____

RELEASE: 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 condition of the road, all such risks being known and appreciated by me. I am aware that the medical support for this event may be volunteers which will be prepared to administer first aid assistance. I hereby grant permission to the sponsors of the Star Trax 5K to use any photograph or any other record of this event for any legitimate purpose. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, do hereby release, indemnify, and discharge all sponsors, service organizations, municipalities, and volunteers, their representatives and successors, from all claims of any kind arising out of my participation in this event.

SIGNATURE: _____

DATE: _____

SIGNATURE OF PARENT OR GUARDIAN (if under age 18): _____

DATE: _____

As parent or guardian of the above runner under age 18, I acknowledge reading the above release and agree to be bound by its terms in all respects, including, but not limited to my agreement to indemnify all sponsors, service organizations, municipalities, volunteers, their representatives, successors, and assigns from any and all claims arising from my child's participation in this event