

UPPER ARLINGTON CIVIC ASSOCIATION MEMORIAL DAY 5 MILER

MONDAY, MAY 26TH – 9:00AM

Come participate in the 37th Annual UA Memorial Day 5 Miler, a true Memorial Day tradition here in Central Ohio and the oldest running race in Columbus. 100% of the proceeds benefit the Upper Arlington Civic Association and their associated charitable functions throughout the year.

AWARDS

Awards will be given to the top three males and females overall as well as the top three in each category. Random prizes to be given out as well, BUT you must be present to win...

ENTRY FEE

\$25 until 05/21, \$30 after 05/21 and \$35 on race day

DISTANCE

5 Miles

PRE REGISTRATION & PACKET PICKUP

FrontRunner: 1344 W. Lane Ave – Columbus, OH 43221
Dates & Times: Wednesday 05/21 to Sunday 05/25
Wed - Fri 10:00 a.m. - 8:00 p.m., Sat 10:00 a.m. - 6:00 p.m.
and Sunday from 12:00 p.m. to 5:00 p.m.

REGISTRATION

Monday 7:00 a.m. – 8:45 a.m.
RACE DAY REGISTRATION IS ALLOWED

DIVISIONS

Age Groups: Under 11, 11 - 14, 15 - 19, 20 - 24, 25 - 29, 30 - 34, 35 - 39, 40 - 44, 45 - 49, 50 - 54, 55 - 59, 60 - 64, 65 - 69, 70+, Cruisers (Men over 200lbs and Women over 150lbs) and Race Walkers (Must walk entire event)

COURSE INFORMATION

A wonderful 5 mile loop course rolling through the residential streets of Upper Arlington. This is a USATF Certified course with volunteers calling out split times at each mile.

Reed & Lytham Road – Upper Arlington, OH 43220

DIRECTIONS

FROM S.R. 315, exit at Henderson Road and proceed west to Reed Road and then turn south by making a left. The race will start at the corner of Lytham and Reed Roads. The Reed Road Fire Station is located on that same corner.

RACE PACKET

Includes a short sleeve tech shirt with logo, sponsor information and other goodies.

COURSE RECORDS

Kevin Foley - 1979 - 24:48 (Male Athlete)
Renee Mangette - 2000 - 29:06 (Female Athlete)
Rich Wagner - 1994 - 21:19 - (Wheel Chair Athlete)

CHARITABLE ORGANIZATION

Proceeds benefit the Upper Arlington Civic Association

AMB CHIP PICK-UP

Chip pick-up is race day from 7:00 a.m. to 8:45 a.m. so bring your race BIB # to get your chip and neoprene ankle strap. If you want to be timed, eligible for awards and results posted on the web, you MUST wear the chip. Please arrive at least 30 minutes prior to race start to get your chip.

NOTE: Lost or unreturned chips will result in a \$100 fee charged to participant.

USATF COURSE CERTIFICATION #:

OH 06001 PR

ONLINE REGISTRATION: www.runwildracing.com

QUESTIONS & CONTACT INFO:

614-795-0249 or info@runwildracing.com

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REGISTRATION FORM

Step 1: Personal Information

First Name: _____
Last Name: _____
Address: _____
City: _____ State: ____ Zip Code: _____ Phone: () _____
Birthdate: _____ Sex: Male / Female T-shirt Size: XS S M L XL XXL
Email: _____
Emergency Contact Name: _____ Emergency Contact Phone: () _____

Step 2: Select Your Division

- Age Group
- Cruisers (200+lbs for Male and 150+lbs for Female)
- Race Walker (Must walk entire event)

Step 3: Entry Fee

- Early Registration: \$25 (Until May 21st)
- After May 21st: \$30
- Race Day: \$35

Please make your check payable to:

Upper Arlington Civic Association - C/O: Run Wild Racing
P.O. Box 251 - Alexandria, Ohio 43001

Running/Walking Club Name: _____ Club Run Wild Member: Yes / No

Waiver:
The undersigned ("ATHLETE") on behalf of himself/herself and on behalf of Athlete's personal representatives, assigns, heirs, executors, hereby fully and forever release, waives, discharges and covenants not sue the UACA (Upper Arlington Civic Association), Victory Man Racing, LLC, dba Run Wild Racing, the City of Upper Arlington, the Upper Arlington Recreation & Parks Department, the USATF, and all municipal agencies whose property and/or personnel are used, and all other sponsoring or co-sponsoring companies or individuals related to the UACA Memorial Day 5 Miler (collectively "RELEASEES") from all liability to the Athlete and his/her personal representatives, assigns, heirs, and executors, for all loss(es) or damage(s) and any and all claims or demands therefore, on account of inquiry to the Athlete or property or resulting in the death of an Athlete, whether caused by the active or passive negligence of all or any of the Releases or otherwise, in connection with the Athlete's participation in the UACA Memorial Day 5 Miler ("RACE"). The Athlete represents and warrants that he/she is in good physical condition and is able to safely participate in the RACE. The Athlete is fully aware of the risks and hazards inherent in participating in the RACE and hereby elects to voluntarily compete in the RACE, knowing the risks associated with the RACE. The Athlete hereby assumes all risk of loss(es), damage(s), or injury(s) that may be sustained by him/her while participating in the RACE. The Athlete agrees to the use of his/her name and photographs in broadcasts, newspapers, brochures and other media WITHOUT ATHLETE permission or compensation. The Athlete acknowledges that the entry fee is non-refundable and non-transferable. The Athlete hereby consents to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during the event.

SIGNATURE _____ DATE _____

GUARDIAN SIGNATURE (If under 18) _____ DATE _____

FrontRunner / Run Wild Racing Use Only:
BIB # Assigned: _____ Payment Method: _____
Amount: _____ Packet Pick-Up Date: _____