

# The 8<sup>th</sup> Annual Senior Scholarship Fund Run

*Halloween Theme!*

To benefit the Class of 2017

Sunday, October 30<sup>th</sup>



## Event Location

- West Bridgewater Middle-Senior High School
- 155 West Center Street
- West Bridgewater, MA

## Event Line Up

- 8:30 AM Registration Opens
- MSHS Gym
- 10:00 AM 5k Run/Walk Start

## Race Information

Race Website: <http://sites.google.com/site/wbscholarshipfund>

Race Day registration or paper pre-registration.

Complete registration form in advance or show up and fill one out!

Supervised Halloween activities for kids will take place in the HS courtyard while parents race.

Costumes encouraged for all ages!

Questions to Kyla Daley at [kdaley@wbridgewater.com](mailto:kdaley@wbridgewater.com) or (508) 894-1220

## Prizes

**5k Run/Walk:** First 3 Males and Females overall and first 3 Males and Females in each age category;  
*Under 13, 13-18, 19-29, 30-39, 40-49, 50+*

## Entry Fee

### **5K Run/Walk:**

- \$15.00 registration fee for all adults
- \$10.00 all current students, 12<sup>th</sup> grade and under
- Make checks **Payable To:** WBHS; *Scholarship Fund* in memo field

## **Kids Activities:**

- Donations accepted!

**T-SHIRTS:** Race shirts available for \$15.00 while supplies last!

## Course Description

Due to building construction, the start and finish of the race course will be adjusted as we get closer to race day.

*Generally, runners and walkers will begin near the HS then follow Spring Street out until North Elm. Participants will then take a right onto North Elm and stay on the right-hand side of the road until Maolis Avenue. Runners and walkers will follow Maolis back to Spring Street and re-trace the route to the start/finish area. A water station will be available on the way out and back at the intersection of Spring Street and Maolis Avenue. The course will be open to traffic, but volunteers will be assisting runners along the course and at each intersection.*

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## ENTRY FORM



*One form per entrant, please print clearly and fill out each section entirely.*

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email (optional) \_\_\_\_\_ Phone \_\_\_\_\_

Please enter me in the *Senior Scholarship Fund Run*. In signing the Entry Form, I agree to assume all responsibility for, and all risk of, damage or injury that may occur to me while traveling to, from, or while participating in or attending the *Senior Scholarship Fund Run* activities. I hereby for myself, my heirs, my executors, and administrators release and discharge any and all sponsors, and all persons associated with the event including the Town of West Bridgewater, The Senior Scholarship Fund, volunteers, and organizers of the *Senior Scholarship Fund Run* for injuries suffered by me. I attest and certify that I am physically able and sufficiently trained for competition or for walking this event. I also grant permission for the use of my name and/or picture in any broadcast or other account of this event.

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of Parent/Guardian:** (if entrant is under 18):

\_\_\_\_\_ **Date** \_\_\_\_\_

Checks payable to: WBHS (*Scholarship Fund* in Memo Field)

c/o West Bridgewater Middle-Senior High School

155 West Center St, West Bridgewater, MA 02379

**(\$10/students and \$15/adults)**

I am not able to run or walk but would like to contribute.

Please find enclosed my donation of \$ \_\_\_\_\_

-----**Official Use Only**-----

Date Received \_\_\_\_\_ x

Payment Type \_\_\_\_\_ cash \_\_\_\_\_ or \_\_\_\_\_ check \_\_\_\_\_

Bib Number: \_\_\_\_\_

Category Color: \_\_\_\_\_

(form 10/6/16)