

# LITTLESTOWN GOOD OLE DAYS

# 5K

**Saturday, August 15, 2020 8:00 am**

(registration begins at 7:00am)

**Advance Registration:** (Postmarked by August 8<sup>th</sup>) - **\$20** **Late**  
**Registration:** (Postmarked after August 8<sup>th</sup>) - **\$25** **Team**  
**Registration:** 5 or more runners from an organization **\$15** per runner  
 (registrations must be bundled together and postmarked by August 8<sup>th</sup>) Race Day fee **\$20**

Checks should be made payable to **Littlestown Basketball Boosters**  
 and mailed/delivered to **Littlestown YMCA, 95 Keystone St,**  
**Littlestown, PA 17340** (mark "5K Run" in the memo line)



Course Records			Overall	Male: 16:49	Female: 19:17
Age Group	Male	Female		Matthew Martino	Jessica Paholsky
<b>13&amp;Under</b>	22:02	29:06:00	<b>35 - 39</b>	21:37	23:13
	Emerson Sites-Byers	Marrin Crist		Chris Barnebei	Kelly Renner
<b>14 - 19</b>	18:02	23:22	<b>40 - 44</b>	21:11	24:15:00
	Tim Shoul	Janelle Kress		Chris Grelli	Kelly Renner
<b>20 - 24</b>	16:52	19:17	<b>45 - 49</b>	19:27	23:58
	Chris Savageau	Jessica Poholsky		Bob Breighner	Ginger Miller
<b>25 - 29</b>	16:49	24:43:00	<b>50 - 59</b>	20:28	24:35:00
	Matthew Martino	Nicole Groge		Doug Crist	Judy Roche
<b>30 - 34</b>	18:36	23:31	<b>60 - Older</b>	21:52	32:17:00
	Darren Groft	Lisa Kuhns		Neal Riemenscheider	Luida Galinaites

## Littlestown Good Ole Days 5K Run/Walk Registration Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: M F Race Day Age: \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_\_\_

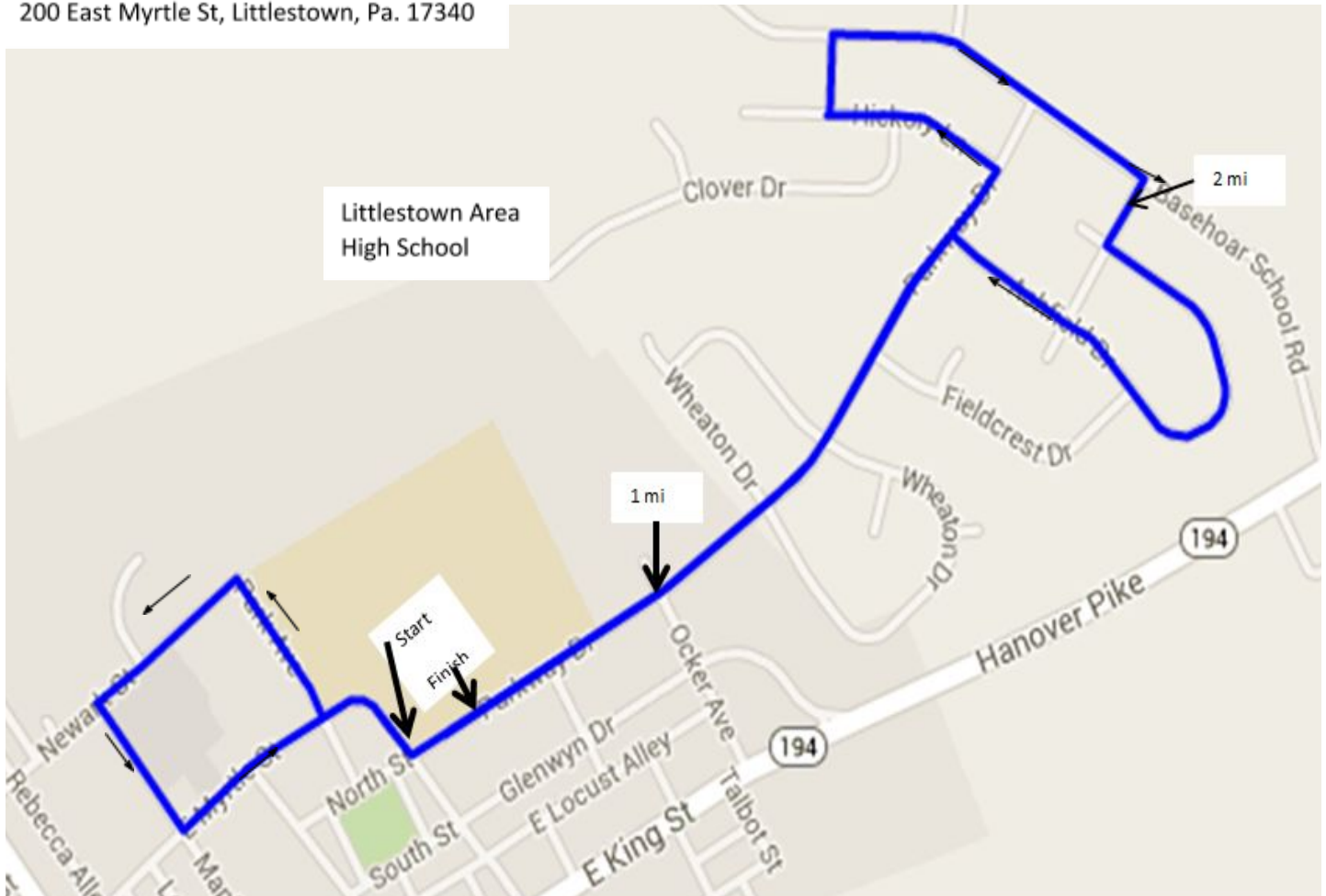
Shirt Size: S M L XL Team Organization (if applicable) \_\_\_\_\_

**Please don't forget to sign waiver on back of form**



## Course Map

200 East Myrtle St, Littlestown, Pa. 17340



In consideration of being permitted to participate in the Good Ole Days 5K 2020, I hereby for my heirs, my personal representatives and myself assume any and all risks that might be associated with the event. I further waive, release, discharge and covenant not to sue YMCA, Littlestown Historical Society, Littlestown Bolt Boosters, their officers, employees, organizers, volunteers or other representatives or successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities. I also agree to the use of any photo, film or videotape of the event that may include my likeness for any purpose.

Participant's Signature: \_\_\_\_\_

**If the participant is under 18, the parent/legal guardian must sign**