

# LITTLESTOWN GOOD OLE DAYS

# 5K

**Saturday, August 17, 2019 8:00 am**

(registration begins at 7:00am)

**Advance Registration:** (Postmarked by August 10<sup>th</sup>) - **\$15**

**Late Registration:** (Postmarked after August 10<sup>th</sup>) - **\$20**

**Team Registration:** 5 or more runners from an organization **\$12 per runner**  
(registrations must be bundled together and postmarked by August 10<sup>th</sup>) Race Day fee **\$17**

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

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**guaranteed  
T-Shirt**



Awards and Course Records			Overall	Male: 16:52	Female: 19:17
Age Group	Male/#Trophies	Female/#Trophies	Age Group	Male/#Trophies	Female/#Trophies
<b>13&amp;Under</b>	22:02 (3)	29:06 (3)	<b>35 - 39</b>	21:37 (3)	23:13 (3)
	Emerson Sites-Byers	Marrin Crist		Chris Barnebei	Kelly Renner
<b>14 - 19</b>	18:02 (3)	23:22 (3)	<b>40 - 44</b>	21:11 (3)	24:15 (3)
	Tim Shoul	Janelle Kress		Chris Grelli	Kelly Renner
<b>20 - 24</b>	19:31 (3)	19:17 (3)	<b>45 - 49</b>	19:27 (3)	23:58 (3)
	Derek Breighner	Jessica Poholsky		Bob Breighner	Ginger Miller
<b>25 - 29</b>	22:30 (3)	24:43 (3)	<b>50 - 59</b>	20:28 (3)	24:35 (3)
	Wayne Diehl	Nicole Groge		Doug Crist	Judy Roche
<b>30 - 34</b>	18:36 (3)	23:31 (3)	<b>60 - Older</b>	21:52 (3)	32:17 (3)
	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**

In consideration of being permitted to participate in the Good Ole Days 5K 2019, 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.

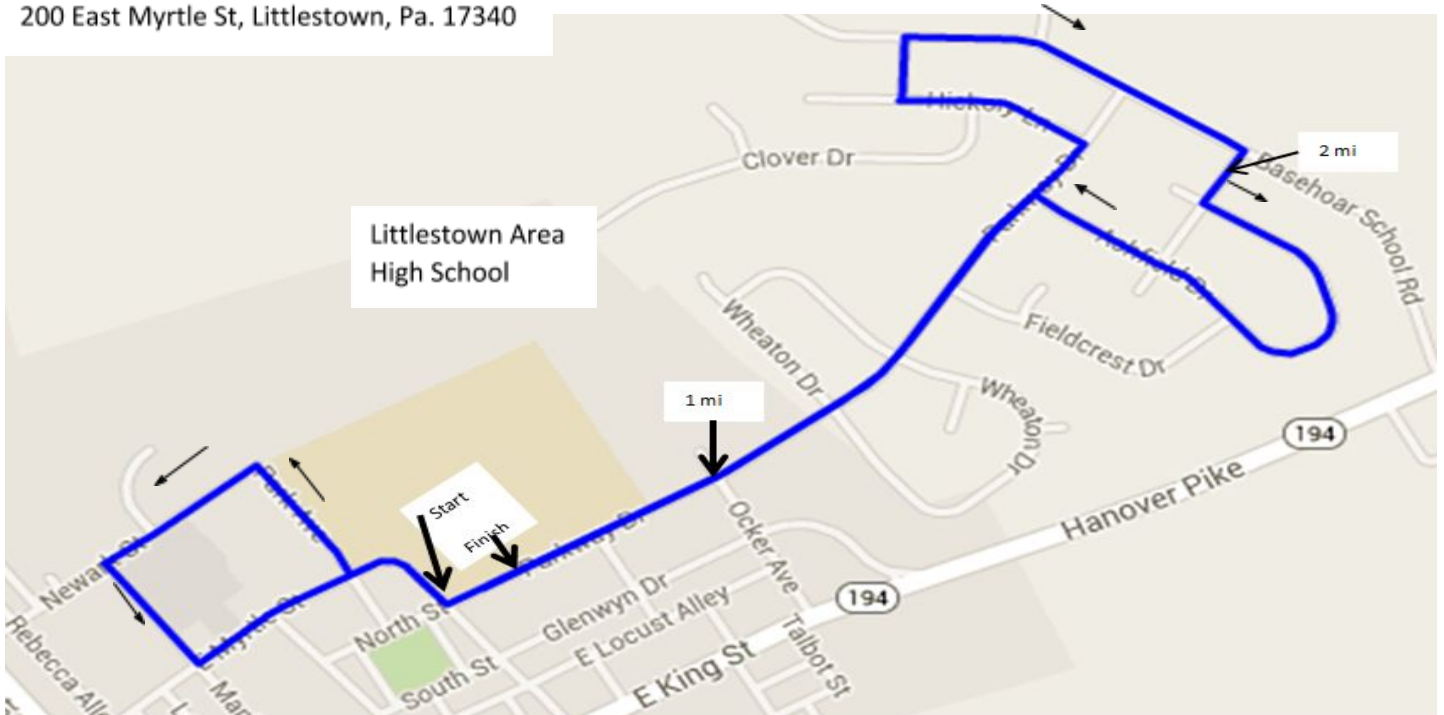
Participant's Signature: \_\_\_\_\_

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



## Course Map

200 East Myrtle St, Littlestown, Pa. 17340



**Sponsors:** Little's Funeral Home, Cole Family Dentistry, PIVOT Physical Therapy, ACE Hardware, Littlestown Foundry Inc, PNC Bank, Rotary, L&T Electrical Inc, Bosley Towing & Recovery, Hawk Industries, Mason Crafters, Stoney Point Inc, Vista Machines, Littlestown Auto Care, Hulls, Protection Mutual Ins Co of Littlestown