



21st Annual
EATON 5K
 Run/Walk
October 20, 2018
9:30 am

Entry fees:

- \$20 postmarked on or before October 13th
 - \$25 after October 13th and on race day, 8am - 9:15am
 - T-Shirts for **preregistered runners**
- No shirts guaranteed after October 13th

Course:

Mainly Flat, with a few rolling hills.

Directions:

From Syracuse-Rt. 92 to Caz, Rt. 20 East to Morrisville, Right at Light, Eaton St. to Eaton, Left on Rt. 26,
 Left on Mechanic St. to Firehouse
 From Utica-Rt. 12B to Rt. 20, Rt. 20 West to Rt. 26, South to Eaton,
 Right on Mechanic St. to Firehouse.

Parking:

Fireman's Field - Brooklyn St.

For more information or to register call:

Craig North (315) 825-5691

E-mail: southof20@yahoo.com

Trophies to top male and female finishers overall.

Ribbons for 1st, 2nd, and 3rd place in each age group.

Age Groups:

14 and under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, 80+

***Course Records:**

Male---Mark Seigers
16:32 (2011)

Female---Celia Alterio
19:01 (2011)



Register by mail
 by October 13th
 or on raceday from 8am-9:15am

Make Checks payable to
 Eaton 5K Run/Walk
 Mail form and entry fee to:

Eaton 5K Run/Walk
 c/o Craig North
 2277 Church Rd.
 Hamilton, NY 13346

Phone: (315) 825-5691
 E-mail southof20@yahoo.com

Name _____

Address _____

Phone/E-mail _____

T-Shirt Size S M L XL

Gender _____ Age on Raceday _____

Disclaimer:

I, the undersigned, accept full responsibility for myself and for any injuries I may incur during this race. I understand that physical exertion is inherently dangerous. Risks include, but are not limited to my own medical and physical conditions, motor vehicle traffic, road surface conditions, and weather. 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, waive and release the volunteers of this race, the Eaton Fire Dept., the Eaton 5K Run, and the town of Eaton, and anyone involved with this race.

Signature _____ Date _____

Parent's Signature (If under 18) _____ Date _____

Emergency Contact (name and phone) _____