



47th ANNUAL FOOL'S RUN 10K & 5K

Saturday, April 4, 2026, 10:00 AM

Saylor Park on the Ghost Town Trail, Black Lick, PA
(GPS: 1284 Old Indiana Road, Blairsville, PA 15717)

Race Directors: Marilyn Gregory, Bill Winters, Donna Scanlon, Dick Gigliotti

SPONSORED BY

S&T Bank and Indiana Regional Medical Center

CONDUCTED BY

Indiana Road Runners Club

Chip Timing by Gingerbread Timing

**Fool's Run Finishers'
Medals Courtesy of
Bill Leydic**

How to Register:

Register online at RunSignUp.com "Fool's Run 10K & 5K"

Online registration closes at 11:59 PM on April 3, 2026

Or fill out application on the back and return with check or money order

Race day registration at Saylor Park from 8:30 – 9:45 AM
Pre-registration is encouraged

Fees:

\$20.00 per runner or walker

Family Rate - three or more runners or walkers
from the same household - \$15.00 each

The Ghost Town Trail is a closed course with no road crossings or traffic. Ideal for runners and walkers of all ages. Bring the family.

Race Shirts:

Race shirts courtesy of S & T Bank and Indiana Regional Medical Center guaranteed through March 23, 2026. After that date and on race day as supplies last.

Awards will be presented in 10K & 5K:

Top Three Overall Male & Female, Top Male & Female Masters,
Top Three in Age Groups 15 and under, 16-19, 20-24, 25-29, 30-34,
35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70+

Walkers welcome, no separate walker awards

For safety and insurance reasons: No baby strollers or dogs

For information, call 814 749-8556 or e-mail marathonauctions@gmail.com

RACE APPLICATION - FOOL'S RUN 10K & 5K 2026

Name _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-mail _____

10K _____ 5K _____ GENDER _____ AGE ON RACE DAY _____

SHIRT SIZE S _____ M _____ L _____ XL _____ 2XL _____

EMERGENCY CONTACT NAME _____ PHONE _____

OFFICIAL RELEASE/AGREEMENT: As consideration for being permitted by Indiana Road Runners Club to participate in Fool's Run 10K & 5K, I hereby agree that I, my assignees, heirs, distributees, guardians and legal representatives will not make a claim against, sue or attach the property of the Promoters and Sponsors, for any and all injuries or damage arising from my participation in the run/walk. I also give free use of my name and/or picture in any broadcast, telecast, or other account of this event.

ASSUMPTION OF RISK: I am aware that running/walking a race is a strenuous and potentially dangerous activity. With knowledge of the risk involved, I hereby agree to accept any and all risks of injury or death. I represent and certify that I am physically fit, and I have sufficiently trained for this event. I have carefully read this agreement and understand its contents. I'm aware that this is a release of liability, and a contract between myself and the Promoters and Sponsors and sign it of my own free will.

Signature _____ Date _____

Parent or guardian signature required if under 18

MAKE CHECKS PAYABLE TO "FOOL'S RUN"

MAIL TO: Fool's Run, 522 Locust Street, Indiana, PA 15701

Live results at catchmetiming.rsupartner.com/results