



44th ANNUAL FOOL'S RUN 10K & 5K

Saturday, April 1, 2023
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
Race Director Emeritus: Dick Gigliotti

SPONSORED BY

CONDUCTED BY

S&T Bank and Indiana Regional Medical Center Indiana Road Runners Club

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

Online registration closes at midnight on March 29, 2023

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

Race day registration at Saylor Park opens at 8:30 AM. Pre-registration is encouraged.

**Fees - \$20.00 to March 21, 2023,
\$25.00 after March 21, 2023, and on race day**

**Family Rate - \$15.00 each by March 21, 2023, \$20.00 after,
3 or more from same household**

**Quality race shirt courtesy of S & T Bank and Indiana Regional Medical Center
guaranteed to first 150 pre-registered by March 21, 2023.**

**Shirts available after that date and on race day as supplies last.
Register early to avoid disappointment!**

**Awards 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

Course will be closed by 11:30 AM

**Masks and Social Distancing required according to
CDC guidelines at the time of the event**

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

RACE APPLICATION - FOOL'S RUN 10K & 5K 2023

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 _____

Waiver: I, for myself and anyone entitled to act on my behalf, waive and release Indiana Road Runners Club, event workers, event sponsors and property owners from all claims or liabilities of any kind arising out of my participation in the Fool's Run 10K & 5K to be held on April 1, 2023, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 in connection with my participation in this event and personally assume this risk.

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

Refunds will be issued only in the case that the event is cancelled

Results at www.indianaroadrunners.com within 24 hours of event