

Ninth Annual Woodland Wallahatchie 10K, 5K & 1 Mile Run/Walk

PIKE ROAD, ALABAMA



DONATIONS ARE ALSO ACCEPTED. PLEASE MAIL TO THE SAME ADDRESS BELOW.

- DATE:** Saturday, August 21st, 2010
- TIME:** Late Registration 6:30 – 7:00 am for 10K and 5K and closing at 8:15 am for 1 Mile.
10K and 5K Race start 7:15am CST 1 Mile Run/Walk start 8:30 am CST
- PLACE:** Woodland United Methodist Church
4428 Wallahatchie Road
Pike Road, Alabama
- FEATURES:** Each pre-registered 10K, 5K and 1 Mile participant will receive a T-Shirt. Those who choose to make donations (in excess of \$15) may also receive a T-shirt upon request. Course is an out and back route on a flat, paved country road with few intersections.
- ENTRY:** Pre-registration (postmarked by August 10th) - \$20.00
Day of Race registration - \$25.00 T-Shirts are guaranteed only for those pre-registered.
- INFO:** Contact Barbara White by e-mail at LJMBW357@charter.net or by phone at (334) 244-6499. You may also check out the race on <http://www.woodlandontheweb.org>.
- AWARDS:** For the 10K and 5K: Awards will be 3 deep in 10 year age groups for both Male/Female, in addition to Overall Male/Female and Overall Masters Male/Female awards.
For the 1 Mile: All finishers will receive a ribbon, along with the top 3 Male/Female runners receiving an award.

OFFICIAL ENTRY FORM (Please print clearly)

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Birth date: _____

Sex: M _____ F _____ 10K Race _____ 5K Race _____ 1 Mile Run/Walk _____

T Shirt: YL ___ S ___ M ___ L ___ XL ___

Email address: _____

In consideration of acceptance of this entry, I hereby waive any and all claims for myself and my heirs against The Leukemia and Lymphoma Society, Woodland United Methodist Church, the HC Accounting Club, and any other sponsors and officials involved in this event, for injury or illness that may result directly or indirectly from my participation in this race. I further state that I am in proper physical condition to participate in this race.

Signature: _____ Date: _____

Guardian : _____ (if under 18 yrs old)

Checks payable to HC Accounting Club. Mail w/form to 179 Laurelwood Dr, Pike Road, AL 36064