

# COOPERSBURG KIDS' FUN RUN

In conjunction with the Coopersburg 5K Run for Pulmonary Fibrosis



**Saturday, May 27, 2017 (Memorial Day Weekend)**

LINE-UP TIME: 7:45 am; OFFICIAL START TIME: 7:55 am

## Registration Form

**Date/Time:** Saturday, May 27, 2017. Rain or Shine

**Race:** Line-Up at 7:45 am; Official Race Time: 7:55 am

**Location:** On Main Street in Coopersburg, PA. There will be an approximately 600 meter dash from the starting point of the 5K on Main Street to the Coopersburg Village Shopping Center. Please see race map at [www.coopersburg5k.org](http://www.coopersburg5k.org). If you have any further questions, please contact Jennifer H. Wescoe at 484.553.6340. The profits will benefit Wescoe Foundation for Pulmonary Fibrosis. Please visit our website to learn about our heartfelt cause at [www.wescoefoundationforpulmonaryfibrosis.org](http://www.wescoefoundationforpulmonaryfibrosis.org)

**Awards:** Awards will be guaranteed to all participants registered prior to Wednesday, May 24, 2017

**Directions:** Main Street, Coopersburg runs parallel to Rt. 309. **Rt. 309 N:** Pass Coopersburg Diner, at next traffic light turn left onto Fairmount Street (Fairmount Shopping Village). Continue to traffic light and turn left onto Main St. Race begins two blocks beyond the next traffic light. **Rt. 309 S:** Turn right at traffic light onto Fairmount Street (Fairmount Shopping Village) in Coopersburg. Continue to traffic light and turn left onto Main Street. Race begins two blocks beyond the next traffic light. Parking areas are designated on race map.

**Fee:** \$10 for each participant (if registration is marked before Friday, May 19, 2017, you will receive a complimentary tee-shirt; \$15 thereafter). Each family member needs to fill out a separate registration form. Make checks payable to: Wescoe Foundation for Pulmonary Fibrosis or WFPF **Online registration** is available at [www.coopersburg5k.org](http://www.coopersburg5k.org) ([www.active.com](http://www.active.com), closes on 5/24/2017)

-----DETACH and RETURN THIS PORTION-----

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

### CONSENT and WAIVER

I hereby declare myself in good physical condition and able to run or walk in the Coopersburg KIDS' FUN RUN. I do hereby waive and release the individuals associated with this event, its agencies, representatives, successors, and assigns, from any claims for damages of any nature, including personal injury that I may incur as a result of my participation.

Print name: \_\_\_\_\_ Date signed: \_\_\_\_\_

Signature of legal guardian: \_\_\_\_\_

Age : MALE: \_\_\_\_AGE: \_\_\_\_

FEMALE: \_\_\_\_AGE: \_\_\_\_

**Tee-Shirt Size: CIRCLE ONE:**

Youth Extra Small Youth Small Youth Medium Youth Large

Thank you to our Main Street Sponsors



Andrew F. Filler

