

# Christmas Tree 5K

on the historic W&OD Trail

Sunday, December 3, 2017 - 11:00 AM

Start / Finish at Glencarlyn Park, 4955 Columbia Pike, Arlington VA 22204

Presented by:



and



To Benefit:



### Arlington South Lions Club

- Early bird price!** • Enter early and save \$20 • Enter on-line at [www.safetyandhealthfoundation.org/christmastree](http://www.safetyandhealthfoundation.org/christmastree)
- Celebrate!** • Inaugural Christmas 5K Tree Race !
- Course** • Utterly Flat & totally scenic Historic Washington & Old Dominion Trail
- Open to all** • Runners and walkers welcome. Enjoy a lovely day on the W&OD Trail! See displays about the W&OD before & after race
- Pre-Race** • Packet pick-up Saturday, December 2, 3:00 PM to 5:00 PM at [Pacers Running Store, 3100 Clarendon Boulevard, Arlington VA 22201](http://Pacers Running Store, 3100 Clarendon Boulevard, Arlington VA 22201) (703-248-6883)
- Race-Day** • Packet pick-up Sunday, December 3, 10:15 AM to 10:45 AM on-site at Glencarlyn Park, 4955 Columbia Pike, Arlington VA 22204
- Post-race** • Refreshments courtesy of sponsors
- Awards** • 1st, 2nd, 3rd M/F overall and 1st, 2nd, 3rd M/F by 10-year age-group
- Directions** • From US 50 (Arlington Boulevard), south on Carlin Springs Road, left onto Columbia Pike
- Free parking across the street
- Sponsors** • See [www.safetyandhealthfoundation.org/christmastree](http://www.safetyandhealthfoundation.org/christmastree) or call 703-927-4833 or write [racedirector@att.net](mailto:racedirector@att.net)
- Lions Eyeglass Recycling Center of Northern Virginia
- Benefits** • Old Dominion Eye Foundation



### Christmas Tree 5K • REGISTRATION FORM

Make checks payable to SHF • 611 South Ivy Street • Arlington VA 22204

By entering this event, I agree, warrant and covenant as follows: I know that running is a potentially hazardous activity. I should not enter or run in competitive runs unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release Arlington County Virginia, Arlington South Lions Club, Old Dominion Eye Foundation, Northern Virginia Regional Park Authority, RRCA, USATF, Safety And Health Foundation, Friends of the W&OD Trail, and all sponsors, their directors, officers, employees, agents, representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I acknowledge that the application fee shall be non-refundable. I agree that the organizers of this event may use my name and likeness for publicity purposes.

Signature \_\_\_\_\_ (parent or guardian if under 18)

Name \_\_\_\_\_ Gender  (M)  (F) Age on 12/03/2017  \_\_\_\_\_

Address \_\_\_\_\_ Birthday \_\_\_\_-\_\_\_\_-\_\_\_\_ (mm-dd-yy)

City ST ZIP \_\_\_\_\_ Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

E-mail \_\_\_\_\_ T-shirt  (XS | S | M | L | XL | XXL)

Best 5K \_\_\_\_:\_\_\_\_ Where/When? \_\_\_\_\_  I will push a baby-stroller (start at 10:59 AM)

Enclosed is my entry fee. Please make your check payable to SHF.

- |   |  |
|---|--|
| Adults  | Students up to age 12 & Active Duty Military                                 |
| <input type="checkbox"/> \$20 by November 15, 2017  | <input type="checkbox"/> \$10 by \$20 by November 15, 2017                   |
| <input type="checkbox"/> \$25 by November 30, 2017  | <input type="checkbox"/> \$15 by November 30, 2017                           |
| <input type="checkbox"/> \$30 by December 2, 2017   | <input type="checkbox"/> \$20 by December 2 2017                             |
| <input type="checkbox"/> \$40 on December 3, 2017 - race-day before 10:45 AM              | <input type="checkbox"/> \$30 on December 3, 2017 - race-day before 10:45 AM |
| <input type="checkbox"/> Enclosed is an additional tax-deductible donation \$____ to ODEF |  |

I want to donate to Old Dominion Eye Foundation. Enclosed is  \$20 Individual  \$30 Family  \$50 Contributor  \$75 Sponsor (Please make a separate check payable to ODEF)