

The Comfort of Home

Community Hospice provides compassionate hospice and palliative care for those facing a life-limiting illness. In addition to providing high quality medical care, Community Hospice also provides for the physical, emotional and spiritual needs of patients and their families. Serving nine counties in eastern Kentucky and southern Ohio for 40 years.

11th Annual



October 29, 2022 Saturday 9am 5K Run/Walk

Ohio Southern University 1804 Liberty Street Ironton, OH

Virtual option available online at TriStateRacer.com

Proceeds go to serve the community through compassionate hospice and palliative care.

- 8am On-Site Registration
 - \$25 pre-registered before October 28th
 - \$25 Day of Race
- •Race Shirts guaranteed to all registered

Trophies to first three overall male and female finishers. Awards to first three finishers in each male and female age group.

No duplication of awards
Age Groups: 9 and under
10-14 15-19 20-24 25-29
30-34 35-39 40-44 45-49
50-54 55-59 60-64 65-69
70-74 75+

- Door prizes
- •Refreshments
- •Run or walk with friends in memory of your loved ones that have passed



Race Director: Alan Osuch
OsuchRacePlanner@aol.com
or 606-369-4403

Course: A mostly flat and fast course thru the streets of Ironton. A combination of blacktop and brick streets.

Race Course records:

Male: Dustin Moritz 16:43 2015 Female: McKenna Pannell 20:25 2015

Please mail registration and <u>check payable to:</u> <u>O Such Race Planners</u> Memo: Run In Remembrance

Run In Remembrance 5K c/o Alan Osuch 5024 Williams Avenue Ashland, KY 41101

to:

Run In Remembrance 5K				
Name:	Addres	ss:		
Email:				
Phone:	Gender:	\mathbf{M} \mathbf{F}	Age on	race day:
Shirt Size	(2X, 3X and 4X add \$2.00)	Donati	i on \$	Enclosed \$
Name of the remembered one you are running for:				
WAIVER: I know that running a road race is a potentially hazardous activity and I should not enter a run unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of weather (including high heat or humidity), traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, I release the City of Ironton, Community Hospice, O Such Tri-State Race Planners, race officials, volunteers and all sponsors from all claims to liabilities arising out of my participation in this event.				
Signature:			_ Date: _	
Pa	arent/Guardian (For mino	r):		