



ACTC Nursing Student Organization (or ANSO) is a student led club dedicated to creating a supportive community for nursing students. We are and will also be committed to actively engaging with our community through initiatives that promote health, wellness and education, exemplifying our dedication to service beyond the classroom.



## 5K Run/Walk

Sunday  
November 17, 2024  
2pm

Boyd County Senior Center  
(New Catlettsburg City Building)  
3015 Louisa Street  
Catlettsburg, KY

### ***Proceeds go to ANSO and the Ashland Senior Center***

<p>1pm On-Site Registration \$25 before November 4th \$30 Nov. 4th thru Nov. 16th \$35 Day of Race •Race shirts guaranteed to all registrants</p>	<p>Support a great cause! Door prizes Refreshments <i>Get an early start on your holiday season with this great family friendly event!</i></p>	<p>Course: Flat and fast. Starts and ends at the Senior Center. Course will be an out and back section followed by a loop out thru the historic city district.</p>
<p>Trophies to first three overall male and female finishers. Awards to first three finishers in each male and female age group. <i>No duplication of awards</i> 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 75-79 80+</p>	 <p>RACE PLANNERS Race Director: Alan Osuch <a href="mailto:OsuchRacePlanner@aol.com">OsuchRacePlanner@aol.com</a> or 606-369-4403</p>	<p>Please mail registration and <u>check payable to:</u> O Such Race Planners Memo: <i>Hungry Hustle 5K</i> to: Hungry Hustle 5K c/o Alan Osuch 5024 Williams Avenue Ashland, KY 41101</p>

\*\*\*\*\*Cut here\*\*\*\*\*

## *Hungry Hustle 5K*

Name: \_\_\_\_\_ Gender: M F Age on race day: \_\_\_\_

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

Phone: \_\_\_\_\_

Shirt Size \_\_\_\_\_ (2X, 3X and 4X add \$2.00) Amount paid \$ \_\_\_\_\_

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 Catlettsburg, ACTC Nursing Student Organization, O Such Tri-State Race Planners, TriStateRacer.com timing, race officials, volunteers and all sponsors from all claims to liabilities arising out of my participation in this event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian (For minor): \_\_\_\_\_