



5K Run/Walk / 10K Run

Proceeds benefits the SOMC LIFE Center Wellness Programs.

Saturday
August 30, 2025

The SOMC LIFE Center
1202 18th Street
Portsmouth, OH 45662



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Competitive Event

- 5K Run
- 10K Run

Start and Finish

The SOMC LIFE Center
1202 18th Street
Portsmouth, OH

Course

Shady, tree-lined, rolling residential area

Entry Fees

\$25/Run. Participants may register
at Tristateracer.com

Awards Presentations (immediately following races)

Awards will be given to the top 3 finishers
in each age division of the 5K/10K run.

Packet pickup begins at 6:30 am on the day of the race.

Special Events

Age Divisions

5K Run 10K Run

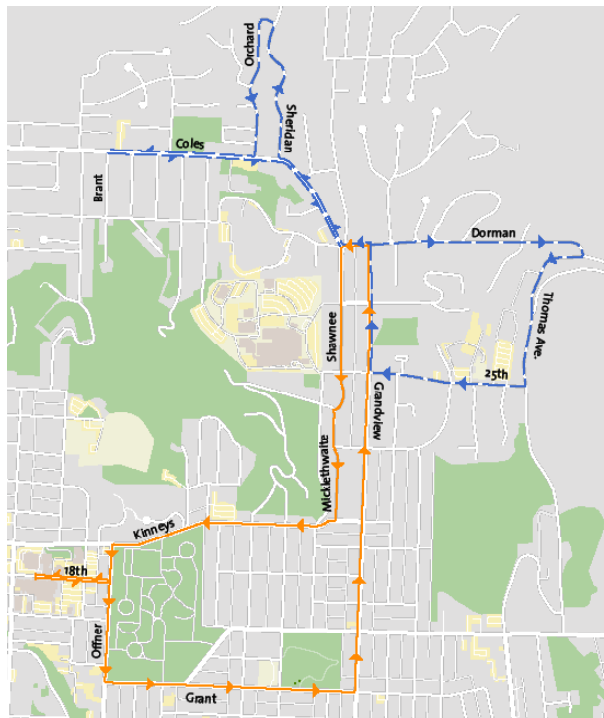
8 & younger	8 & younger
9-14	9-14
15-19	15-19
20-29	20-29
30-39	30-39
40-59	40-59
50-59	50-59
60-69	60-69
70 & older	70 & older

Race Day Schedule

6:30 am	• Registration for 5K/10K (packet pick-up)
7:25 am	• Final Instructions (at starting line)
7:30 am	• Registration Ends (no exceptions)
7:30 am	• Run Begin
9:00 am	• Awards Ceremony

Additional LIFE Center Information

Contact the SOMC LIFE Center at (740) 356-7650. Showers
and restrooms will be available at the SOMC LIFE Center



Entry Form One form per participant; please print

Name _____

Age _____ Sex: M F

Street _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

or register online: www.tristateracer.com

T-shirt Sizes Shirts will be reserved for first 250 registered

Please circle your shirt size: Sm Med Lg X-Lg XX-Lg

Additional shirts may be purchased on day of race for \$10. Supply limited.

Race Choice Please circle your event

5K Run 10K Run

Make check payable to: SOMC Run For Your LIFE
Return entry with remittance to: The SOMC LIFE Center, RFYL
1202 18th Street
Portsmouth, Ohio 45662

For additional race information contact Brad Zieber at
(740) 356-7572 or send an e-mail request to zieberb@somc.org

Waiver: In consideration of your accepting this entry, I hereby for
myself, my heirs, executors and administrators, waive and release
any and all rights and claims for damages I have against THE SOMC
LIFE CENTER, SOUTHERN OHIO MEDICAL CENTER, AND ANY OF THE
LISTED SPONSORS. I give permission for the free use of my name
and/or photograph in any broadcast, telecast or other account of
this event. I further attest and certify that I am physically fit and
have sufficiently trained for competition in the event I am entering.

Signature *(Parent or guardian if under 18)*