AGE CATEGORIES

Male/Female

19 & Under

20-29

30-39

40-49

50-59

60-69

70+

AWARDS:

10 K Trophies - Overall runner & Top 3 for each age category, male/female

5 K Trophies - Top three finishers

Each participant who pre-registers will receive a t-shirt. Shirts will be limited on race day.

Contact Information:

Mail completed registration forms, checks and waivers to:

Randy Perdue, Director
WV Corrections Academy
PO Box 850
Glenville, WV 26351

Phone: (304)462-3044 or (304)549-3959
Fax: (304)462-3052
Email: rperdue1@mail.wvnet.edu

2nd Annual WV 10K Warrior Run & 5K Run/Walk

Saturday, October 2, 2010
Registration 7:00 AM
Race 9:00 AM

Proud Supporter of

WOUNDED WARRIOR PROJECT

DRIVING DIRECTIONS:

Take I-77 to Ripley, Exit 138. Those traveling north, be careful not to take the Ripley/Fairplain Exit. If you are traveling north, you will make a left off of the exit and travel 0.6 miles until you see the Parchment Valley sign on the left. After you make the left, continue driving until you see a big red barn on the left (Parchment Valley Conference Center Administration Building). If you are traveling south, you will need to make a left at the stop sign and a right at the traffic light and then travel 0.6 miles to the Parchment Valley Road. If you have any questions, contact Randy Perdue at 304-462-3044 or 304-549-3959.

COURSE INFORMATION

Water: Available every 2 miles. At the finish line there will be water, sports drink and a snack.

Restrooms: Located at The Parchment Valley Administration Building and Gymnasium.

The course is all paved and has both flat and hill terrain. It starts and finishes at The Parchment Valley Conference Center Administration Building.

WAIVER:

In consideration of acceptance this entry to the Warrior Race, I waive all claims for myself, my heirs and assigns against the WV Corrections Academy and the WV Baptist Conference Center; for injury or illness which may result from my participation. I attest and verify that I have full knowledge of the risk involved in these events, that I am physically fit and sufficiently trained to participate. I have read the above statement, I understand it and my signature confirms its full acceptance.

_____
Signature

_____
Parent/Guardian if under 18 years old

_____
Date

Saturday, October 2, 2010

Race Begins at 9:00 AM

(Registration begins at 7:00 AM)

Registration Fee:

$17 Pre-registration by Sept. 24

$20 Race Day

___ Runner 10 K ___ Male ___ Female

___ Run 5K ___ Male ___ Female

___ Walk 5K ___ Male ___ Female

Make checks payable to:
Wounded Warrior Project

Name: _____

Address: _____

_____

_____

Phone: _____

Age: _____

Date of Birth: _____

Today's Date: _____

PAYMENT ENCLOSED: _____

Adult Shirt Sizes

___ S ___ M ___ L ___ XL ___ XXL

Pre-registration guarantees a T-shirt. Shirts will be limited on race day.