

CYPRESS FESTIVAL

5 K RUN

10:00 A.M. Saturday
JUNE 12, 2010
@ POCOMOKE CITY
CYPRESS PARK

**Race day registration and
check-in will begin at 9:00 A.M..**

COST: \$20

**T-SHIRTS TO THE 1ST 30
ENTRIES**

**FREE REFRESHMENTS
AFTER THE RACE**

AGE GROUPS: Men and Women:
20 & under, 21-30, 31-40, 41-50 &
51 & over.

AWARDS: Medals will be given to
the overall 1st, 2nd & 3rd; the top two
in each male & female category.

INFORMATION: Contact: Charles
McGahagin @ 757-773-1530 or
email: cmcgahagin@gmail.com



This is a Pocomoke City Chamber of Commerce Event

Race Day Registration Only:

Name (Last, First, MI) _____ Sex (circle): M or F

Phone Number _____ Age on Race Day _____

E-Mail Address _____ (Optional if Race Results Desired)

I KNOW THAT RUNNING A ROAD RACE IS A POTENTIALLY HAZARDOUS ACTIVITY. I SHOULD NOT ENTER AND RUN 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 EVENT INCLUDING, BUT NOT LIMITED TO, FALLS, CONTACT WITH OTHER PARTICIPANTS, THE EFFECTS OF WEATHER, INCLUDING THE EFFECTS OF HIGH HEAT, AND HUMIDITY, TRAFFIC CONDITIONS OF THE ROAD, ALL SUCH RISKS BEING KNOWN AND APPRECIATED BY ME. HAVING READ THIS WAIVER AND KNOWING THESE FACTS AND IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, I, FOR MYSELF AND ANYONE ENTITLED TO ACT ON MY BEHALF, WAIVE AND RELEASE THE STATE OF MARYLAND, WORCESTER COUNTY, POCOMOKE CITY, AND THE POCOMOKE CHAMBER OF COMMERCE, AND ALL OTHER SPONSORS, THEIR REPRESENTATIVES AND SUCCESSORS FROM ALL CLAIMS OR LIABILITIES OF ANY KIND ARISING OUT OF MY PARTICIPATION IN THIS EVENT. I GRANT PERMISSION TO ALL OF THE FOREGOING TO USE ANY PHOTOGRAPHS, MOTION PICTURES, OR ANY OTHER RECORD OF THIS EVENT FOR ANY LEGITIMATE PURPOSE.

Signature: _____ **Date:** _____

(Guardian or Parent Signature if Under 18)