

# Saulter Preserve 5K Trail Run/Walk Saturday, June 21<sup>st</sup>

Location: Saulter Preserve Bryant Hollow Rd. Coudersport, PA 16915

5K Race start time: 10:00 AM Kids Fun Run start time: 11:00AM Pre-registration deadline that includes free t-shirt: Monday, June 9<sup>th</sup>. Continued open registration until 9:30 AM on race day

Registration can be completed online for <u>individual</u> <u>registrations only</u> through RunSignup.com. Individual or group registrations may be completed using this form and be mailed to: Potter County Creative Council 1660 E. 2<sup>nd</sup> St. Coudersport, PA 16915

Please fill out participant information below. Fill out a separate registration form for each participant. Group registrations should be submitted together and names written together on at least one registration form.

Participant Name:								
Age on 6/21/25:	Pho	one #:			(Cell/	/Home)		
Address:				City/State:				Zip:
Emergency Contact Nan	ne:					_ Phone	#:	
Other health informatio	on organiz	zers should	d be awa	re of:				
Guardian/Parent Name	(if under	18):						
Please check which race	e you wil	l participa	te in anc	l fill out a	ccompan	iying inf	ormatior	1:
No s    SK GROUP DISC   (Up to 4 people   Participant #1 (Should Should	YM hirt need COUNT RI participa	YLYL_ led EGISTRATI ating in 5K ly be writt	 ONLY; <u>N</u> ONLY; <u>N</u>	<b>10 entry f</b> é <u>ot</u> a team articipant	<b>ee for en</b> t a relay) Name" a	<b>tire grou</b> bove; Pl	<b>יף</b> lease writ	2XL te other participants in ms to provide contact
information and sig		-	•		•	Ũ		
Shirt Size: YS	_ YM	YL	S	M	L	_ XL	2XL	No shirt needed
Participant #2	nt #2 Age on 6/21/25					5		
Shirt Size: YS	_ YM	YL	S	M	L	_ XL	2XL	No shirt needed
Participant #3 Age on 6/21/25						5		
								No shirt needed
Participant #4						Age d	on 6/21/2	5
								No shirt needed

Turn Over -----

<b>FUN RUN REGISTRATION</b>	<u>N</u> – Free!			
*Age 10 and under				
*Donations accepted! *Prizes for all participant	tel			
		you would like	e to purchase one for \$15, plea	se fill out selected size
	-		gned waiver by Monday, June 9	
Participant Name:	C C		· · ·	
Age on 6/21/25:				
Shirt Size(s): YS YM	YL	Adult S	No Shirt Needed	
Participant Name:				
Age on 6/21/25:				
Shirt Size(s): YS YM	YL	Adult S	No Shirt Needed	
Participant Name:				
Age on 6/21/25:				
Shirt Size(s): YS YM	YL	Adult S	No Shirt Needed	
Guardian/Parent Name:				
Phone #:	(Cell/Hor	me)		
Address:		City/State	e:	Zip:
Emergency Contact Name:			Phone #:	
Health information organizers sh	ould be awa	are of:		

## **RACE INFORMATION**

- Pre-registration deadline including free t-shirt: Monday, June 9<sup>th</sup>.
- Continued open registration until 9:30 AM on race day
- Bring a lawn chair or blanket to cheer on the runners and enjoy the music and food!

# Race day location:

Saulter Preserve Bryant Hollow Road Coudersport, PA 16915 \*Go to the online information at www.pococreates.com for location information using Google Maps.

# Parking:

There is limited parking on the preserve site, but roadside parking is available along Summit Road. Carpooling is recommended, if possible.

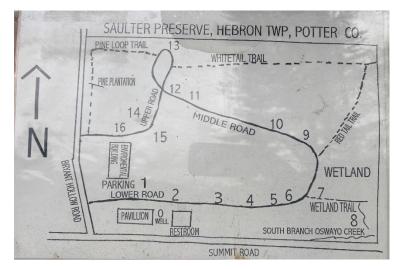
# Check-in/Registration on race day:

8:00 AM – 9:30 AM Pick up race bib/number and t-shirt (if you pre-registered)

# Start Time:

5K Race start time: 10:00 AM Kids Fun Run start time: Approx. 11:00 AM

# Saulter Preserve Map:



## **Race Course:**

The entire course follows the trails on Saulter Preserve only (no roads) and is a mix of grass and leaves/dirt. There are some uphill climbs and areas where the course is more narrow and uneven. All turns in the course will be marked with directional arrows and will also have an individual to direct you at various points. A water station will be available on the course.



#### **Restrooms:**

Restrooms are available on site.

## Water Station:

There will be one water station halfway through the course.

## Water/Snacks:

Snacks and water/beverages will be available to all participants throughout the event at the pavilion at the preserve.

## Kids Fun Run Course:

Children will run a small portion of the 5K trail course.

## Award Ceremony for place winners:

11:15 AM

Medals will be awarded to the top male and female finisher and top 3 finishers in each age category: 12 and below, 13-17, 18-29, 30-39, 40-49, 50-59, 60+

# \*If you have any questions about this event, please contact us at

pococreativecouncil@gmail.com.

This event is sponsored by the PA Council on the Arts and the Potter County Commissioners.



#### WAIVER RELEASE

Read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety. It is a binding legal document. If you are under the age of 18, this form must be signed by you as the participant AND by your parent or legal guardian.

I know that participating in the Potter County Creative Council (PC3) 5K or Fun Run on June 21, 2025 is a potentially hazardous activity and I should not enter and participate unless I am medically able and properly trained. I acknowledge and assume any and all risks associated with this event including, but not limited to falls, contact with other participants, and the condition of the course, including, but not limited to limbs, tree roots, leaves, branches, rocks, and objects on the course. Knowing and appreciating these risks and in consideration of your acceptance of my entry, I hereby for myself, my heirs, representatives or anyone else claiming on my behalf, covenant not to sue, and waive, release, and discharge PC3, its volunteers, and sponsors, and anyone else acting for or on behalf the PC3 5K or Fun Run from any and all claims of liability for death, personal injury, or damage of any kind arising out of my participation in this run. This Acknowledgement of Risk and Waiver of Liability extends to all claims of every kind whatsoever. I also consent to emergency treatment in the event of injury or illness. I grant full permission to PC3 and/or any person or entity authorized by it to use my name, age, date of birth, finish place and finish time in the public domain. I further grant full permission for PC3 to use any photographs, recordings, or any other record of this event for any purpose. My signature acknowledges that I have read the above waiver and I agree and accept all terms and conditions set forth herein.

In signing the Acknowledgement of Risk and Waiver Liability I hereby acknowledge and represent: (a) that I have read this document in its entirety, understand it, and sign it voluntarily; and (b) that this Acknowledgement of Risk and Waiver of Liability is the entire agreement between the parties hereto and its terms are contractual and not a mere recital.

Participant	Signature:
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Data	٠
Date	
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REQUIRED FOR ALL PARTICIPANTS UNDER 18 YEARS OF AGE: PARENT OR GUARDIAN'S AUTHORIZATION FOR MEDICAL CARE AND CONSENT AGREEMENT I certify that I am the parent or legal guardian of the above-named participant in the ACTIVITY. On behalf of myself and my spouse, partner, co-guardian or any other person who claims the participant as a dependent, I have read the above agreement, I understand the contents of this Acknowledgement of Risk and Waiver of Liability, assent to its terms and conditions, and sign this Acknowledgement of Risk and Waiver of Liability of my own free act. I acknowledge that my dependent and I have agreed to the terms and conditions of my dependent's participation in the ACTIVITY, and I hereby give my consent to participation by my dependent in the ACTIVITY, and to receive medical treatment determined to be necessary. I further agree to hold harmless, indemnify and defend PC3 from and against all claims, demands or suits that my dependent has or may have.

Parent or Guardian Signature:\_\_\_\_\_