

5K RACE



SATURDAY, JUNE 8

JOURNEY BANK BALLPARK

1700 WEST FOURTH STREET WILLIAMSPORT Race begins outside front gate and ends inside the stadium!

REGISTRATION/CHECK-IN BEGINS AT 8AM
RACE BEGINS AT 9AM

\$25
REGISTRATION FEE



Proceeds Benefit
THE HOPE FOUNDATION

CATEGORIES AND AWARDS

Awards to top 3 finishers in all male and female age categories for runners.

Runners

Male 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

Female

14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

WALKERS

Awards to top 3 overall.

1st place male & female runners (overall) will have the opportunity to throw a ceremonial 1st pitch at the June 28 Cutters game!

Refreshments and snacks provided at race!

REGISTRATION FORM

PRE-REGISTRATION \$25.00. Guarantees T-shirt size if received by 5/17/24.
REGISTRATION DAY OF RACE \$25.00. T-shirts while supplies last.

5K RUN 5K WALK Virtual Race *

NAME _____

PHONE _____

EMAIL _____

ADDRESS _____

Age as of race day _____ Male Female

T-SHIRT SIZES (Adult) SM MED LG XL XXL

*Virtual participants will receive their T-shirt in late-June but are not eligible for race awards.

* Run with us in-person or choose the VIRTUAL RACE option to walk or run your 3.1 miles when/where you like!

I, the undersigned, acknowledge there are risks and dangers involved in participating in this event. In consideration of the acceptance of my entry, I for myself, my executors, administrators, assignees and anyone else who may claim on my behalf, release and discharge all sponsors, volunteers, race staff, Hope Enterprises/Hope Foundation, Williamsport Crosscutters, Muncy Bank & Trust, owners of personal property adjacent to the race and City of Williamsport from any and all claims of damages, actions and causes of action, whatsoever, in any manner arising out of my participation in this athletic event. I also hereby attest that I am physically fit and able to participate in the Cutters 5K Race. I further grant full permission to Hope Enterprises/Hope Foundation, the Williamsport Crosscutters and/or agents authorized by them to use any photograph, videotape or any other record of this event for any purpose without compensation. Applications for minors (under 18) will be accepted only with the signature of a parent or guardian. Disability Accommodations: This event is open to wheelchairs, strollers, and any other wheeled mobility equipment to help promote an inclusive approach to health and wellness. All ages and all abilities are encouraged to participate.

SIGNATURE _____ DATE _____

PARENT'S OR GUARDIAN'S SIGNATURE (IF UNDER 18) _____ DATE _____

Send checks/entries to: Hope Foundation, Attn: Cutters 5K, 2401 Reach Road, Williamsport, PA 17701

Register online at www.falconracetiming.com (CLICK ON REGISTRATION)

Presented in part by



FLEET MANAGEMENT

HAMILTON PATRIOT LLC



WILLIAMSPORT SUN-GAZETTE

UPMC HEALTH PLAN



Questions?
Contact Race Chairman-
John Engel 570.974.8064