



Laney's Legacy of Hope presents:

Laney's 9th Annual Fashionista 5K

Sunday, May 7th, 2023 | 9:00 am West Reading, Pa

LOCATION: Park at Reading Hospital's 7th Ave parking garage and follow signs to start line at Masonic Parking entrance. **This event is rain or shine.**

CAUSE: To help raise awareness & funds for Laney's Legacy of Hope, taking action against pediatric cancer.

COURSE: Weave through the nearby park system in the lovely town of West Reading, starting and ending at the 7th Ave parking garage.

AWARDS: Awards for the male & female winners 10-13 3M, 3F 14-18: 3M, 3F 19 - 29: 3M, 3F 30-39: 3M, 3F 40-49: 3M, 3F 50-59: 3M, 3F 60+: 3M, 3F. Runners/walkers Ages 10 & under will receive a certificate of completion.

BEST DRESSED AWARDS: 1 Adult Female, 1 Adult Male, 1 Male under 18, and 1 female under 18

REGISTRATION: By April 7th, \$25 with a guaranteed T-shirt; **After April 7th: \$35 with no guarantee of the T-shirt;**

Mail-in registrations must be postmarked by April 7th to receive a guaranteed t-shirt. Day of the registration fee will be: \$35, T-shirt if available, and no guarantee.

RACE PACKETS Early pickups Friday, May 5th, and Sunday, May 6th, times and location to be announced OR day of the race from 7:30-8:30 am in Masonic parking lot, follow signs.

AMENITIES: Porta-pots at start and finish, food & drink for runners, face painting, carnival games, and music while onlookers wait for the race to finish.

DIRECTIONS FROM NORTH OF READING: Take 222 South, follow to 422 east, and take the Penn Ave exit. Proceed on Penn Ave, take a left onto 7th Ave. The parking garage will be three blocks down on the right.

DIRECTIONS FROM SOUTH OF READING: Take 422 west, take the Penn Ave exit. Proceed on Penn Ave, take a left onto 7th Ave., the parking garage will be three blocks down on the right.

Optional online registration available at

<https://www.laneyslegacyofhope.org/laneys-fashionista-5k>

(Nominal service fee applies; online registration closes midnight, Monday, May 1st^h.)

Mail-in forms need to be postmarked May 1st^h

MAIL FORM & CHECK PAYABLE TO "Laney's Legacy of Hope" to

P. O. Box 5861 Wyomissing, Pa 19610

LANEY'S LEGACY OF HOPE: Race Director Jenell Wolf | 610.763.0776 | jwolf@laneyslegacyofhope.org

LAST NAME _____ FIRST NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Sex: M F RACE DAY AGE: _____ DATE OF BIRTH: ____ / ____ / ____ PHONE: (____) _____ - _____

SHIRT SIZE (CIRCLE ONE): S M L XL KIDS (youth): M L

EMAIL (PRINT CLEARLY): _____

WAIVER: 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 also know that there will be traffic on the course and assume the risk of running in traffic. I also assume any or all other risks associated with running or attending the race, including but not limited to falls, contact with other participants, the effects of the weather and the condition of the roads, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge pretzel city sports, Laney's Legacy of Hope and any subcontractors it utilizes, all municipalities in which the race is held, the race committee, volunteers, any and all sponsors including their agents, employees, assigns or anyone acting for on their behalf, or anyone else associated in any way with the race, from any or all claims or liability for death, personal injury or property damage of any kind of nature what so ever arising out of, or in the course of, my participation in this event(s). This waiver extends to all claims of every kind or nature what so ever, foreseen or unforeseen, known or unknown. By entering this race, I am granting permission to pretzel city sports, and Laney's Legacy of Hope to use any pictures or likenesses of me secured at the event in any way they see fit without review, restriction or compensation. **I HAVE READ AND UNDERSTAND THIS WAIVER (if under 18, a legal guardian must sign):**

SIGNATURE _____ DATE ____ / ____ / ____