

GREAT PUMPKIN 5K HALLOWEEN RUN/FUN WALK
SATURDAY, OCTOBER 28, 2017 – 10:30 AM

TALEN ENERGY RIVERLANDS RECREATION AREA (formerly PPL Riverlands) **BERWICK, PA**

RACE LOCATION: Talen Energy Riverlands Recreation Area, 7 miles North of Berwick along Route 11

BENEFIT: Berwick YMCA

SPONSORS: Talen Energy Volunteers and the Berwick Marathon Association

FIRST 150 ENTRANTS WILL RECEIVE A HIGH QUALITY T-SHIRT
WE WILL BE USING CHIP TIMING

ENTRY FEE: \$15.00 Pre-Entry includes T-shirt if received by Oct. 21, \$18.00 thereafter
 \$8.00 Pre-Entry without T-shirt

Checks should be made payable to the Berwick Marathon Association and should be mailed to: Great Pumpkin Run, P.O. Box 856, Berwick, PA 18603. For additional information, please call 570-759-1300.

AWARDS: 1st Male & Female – Gift Certificate

PUMPKIN AWARDS TO THE TOP 3 IN THE FOLLOWING AGE GROUPS:

MALE: 15 & under, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-69, 70 & over

FEMALE: 15 & under, 16-19, 20-24, 25-29, 30-34, 35-39, 40-49, 50-59, 60 & over

COURSE: The course covers 2 loops and is totally flat.

CHECK-IN: 8:30 – 10:15 AM – Registration Pavilion at the Talen Energy Riverlands Recreation Area
 (7 miles North of Berwick along Route 11)

In the spirit of the season, we will be holding a **COSTUME CONTEST**

Special freebies to anyone running in costume!!

All contestants in the costume contest must complete the course in costume to be eligible for special awards.

Be sure that the costume does not restrict vision or movement.

Judging for costumes will occur 20 minutes prior to race in front of the Registration Pavilion.

-----DETACH HERE-----

PLEASE TYPE OR PRINT

PUMPKIN RUN

In consideration of this entry being accepted, I intending to be legally bound, waive and release any and all rights and claims for injuries that may occur at this event, against the YMCA, Berwick Marathon Association, Inc. and any organizations holding the event, Talen Energy, the communities in which the race is run or any official of the race.

Name	Male <input type="checkbox"/> Female <input type="checkbox"/>	Age on 10/28/17	Date of Birth (mm/dd/yy) - -
------	---	-----------------	---------------------------------

Address	City	State	Zip Code -
---------	------	-------	---------------

Email	I will participate in the: Run <input type="checkbox"/> OR Walk <input type="checkbox"/>	Shirt Size <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL
-------	--	--

Date	Signature of Runner
	Signature of Parent or Guardian (if under 18)