



30th ANNUAL

STAR TRAX

5K NIGHT RUN

SATURDAY, AUGUST 5, 2023 - 9:00 P.M.

SPONSORED BY: THE SALEM X-TRA MILE CLUB, INC.

TO BENEFIT THE SALEM HIGH SCHOOL CROSS COUNTRY AND TRACK AND FIELD PROGRAMS

(The Salem X-Tra Mile Club, Inc., is not responsible for any lost or stolen items.)



TIME: REGISTRATION BEGINS AT 7:00 P.M. AT SEBO STADIUM.
REGISTRATION WILL CLOSE AT 8:45 P.M. DAY OF RACE. RACE STARTS AT 9:00 PM

LOCATION: RACE STARTS AND FINISHES AT SEBO STADIUM - PERSHING STREET, SALEM, OHIO

#OH18015MW

NON-REFUNDABLE \$20.00 IF RECEIVED BY JULY 28th*

ENTRY FEE: \$20.00 ONLINE REGISTRATION at www.gopherarun.com
Online Registration Ends on 7/31/23. Please bring online receipt with you for confirmation.

\$25.00 NIGHT OF RACE.

***T-SHIRT GUARANTEED TO ALL PARTICIPANTS PREREGISTERED BY JULY 24th**

72 AWARDS: TOP THREE MALES OVERALL AND TOP THREE FEMALES OVERALL WILL RECEIVE CASH PRIZES -
\$100 FOR FIRST, \$75.00 FOR SECOND AND \$50.00 FOR THIRD;
FIRST THREE PLACES IN EACH AGE GROUP WILL RECEIVE MEDALS. NO DUPLICATION OF AWARDS.

AGE GROUPS: MALE & FEMALE - 10 & UNDER; 11-14 15-19; 20-24; 25-29; 30-34; 35-39; 40-44; 45-49; 50-54; 55-59; 60 & OVER

MAKE CHECKS PAYABLE TO: THE SALEM X-TRA MILE CLUB, INC.
ENTRIES SHOULD BE MAILED TO: P. O. Box 122
Salem, OH 44460
FOR ADDITIONAL INFO CALL: Jeff Christopher - (330) 853-8835

Chip Timing, Scoring
& Online Registration
Provided By: Gopherarun.com

FOR REGISTRATION QUESTIONS: Lori Wilson: (330) 301-0890
Laura Menough: (330) 277-3810

OR E-MAIL: salemxtramile@gmail.com **WEBSITE:** www.startrax5k.com

POST RACE PARTY AND AWARDS FOLLOWING THE FINISH AT SEBO STADIUM

PHOTOCOPIES OF THIS FORM ARE ALSO ACCEPTED PLEASE PRINT CLEARLY



2023 STAR TRAX 5K NIGHT RUN REGISTRATION FORM

NAME: _____

MALE: _____ **FEMALE:** _____ (Check One)

ADDRESS: _____

AGE DAY OF RACE: _____

CITY, STATE, ZIP: _____

T-SHIRT SIZE (Circle One): YM YL S M L XL XXL

PHONE: _____

DID YOU RACE LAST YEAR? YES NO (Please circle)

EMAIL: _____

RELEASE: 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, traffic, and condition of the road, all such risks being known and appreciated by me. I am aware that the medical support for this event may be volunteers which will be prepared to administer first aid assistance. I hereby grant permission to the sponsors of the Star Trax 5K to use any photograph or any other record of this event for any legitimate purpose. 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, do hereby release, indemnify, and discharge all sponsors, service organizations, municipalities, and volunteers, their representatives and successors, from all claims of any kind arising out of my participation in this event.

SIGNATURE: _____

DATE: _____

SIGNATURE OF PARENT OR GUARDIAN (if under age 18): _____

DATE: _____

As parent or guardian of the above runner under age 18, I acknowledge reading the above release and agree to be bound by its terms in all respects, including, but not limited to my agreement to indemnify all sponsors, service organizations, municipalities, volunteers, their representatives, successors, and assigns from any and all claims arising from my child's participation in this event