



Ice Cream Social

Following Race

Free to race participants
Look for ice cream ticket
in your packet!
All others \$2.00

DIRECTIONS

From South - Follow 29N to US-58E/Danville Expressway toward Lynchburg/South Boston, exit right on to River Park Drive, bear right off exit, at stop sign take right on Stinson Drive, take first left and follow to lower parking lot.

From North - Follow 29S, exit right on to River Park Drive, turn left off exit on to River Park Drive, follow until stop sign, take right on Stinson Drive, take first left and follow to lower parking lot.

From West - Follow 58E, Merge onto US-58E/Danville Expressway toward Greensboro/South Boston, exit right on to River Park Drive, bear right off exit, at stop sign take right on Stinson Drive, take first left and follow to lower parking lot.

From East - Follow 58W, Merge onto US-58E/Danville Expressway toward Greensboro/Martinsville, exit right on to River Park Drive, turn left off exit on to River Park Drive, follow until stop sign, take right on Stinson Drive, take first left and follow to lower parking lot.

Patriot Challenge
c/o Danville Welcome Center
645 River Park Drive
Danville, Virginia 24540

The Danville Regional Medical Center

PATRIOT



Challenge

★ ★ ★ ★ ★
5K/10K Run / Kids Fun Run

Danville, Virginia

July 4, 2017

8:00 am

Anglers Ridge Trail System

Sponsored by



REGISTRATION FORM

Please Print

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

5K _____ 10K _____ Fun Run _____

Date of Birth _____

Age Race Day _____ Sex: M F

Visa/Mastercard/Discover

_____ - _____ - _____ - _____

Exp. Date _____ Security Code _____

Fees and Payment:

Pre-register 5K/10K - \$25

Add \$10 day of event registration

Kids Fun Run \$5

(Does not include beach towel)

Pre-register:

By phone 793-4636

Online registration through

June 29 at www.playdanvilleva.com

Make check payable to:

City of Danville

Mail check and/or forms to:

Danville Welcome Center

645 River Park Drive

Danville, VA, 24540

Day of Event – CASH ONLY!

BEACH TOWELS

GIVEN TO FIRST 75 ENTRIES

Race Director – Lee Eagle

Danville Welcome Center (434) 793-4636

Email- specialevents@danvilleva.gov

**Packet pick up at Danville Welcome Center

July 1- 3, 9:00 am-5:00 pm**

STARTING TIMES

7:00 am – Registration Opens

8:00 am – Kids Fun Run

8:30 am – 5K/10K

Trail Run

Awards will be given after the

Ice Cream Social

AGE GROUPS

Male / Female Groups

0-14 • 15-19 • 20-29 • 30-39 • 40-49

50-59 • 60 & Up

AWARDS

Overall Male and Female

Master Male and Female

Top Three Finishers

In each group – Male and Female

No Duplication of Awards

ASSUMPTION OF RISK/WAIVER

I, _____ wish to participate in the Patriot Challenge Trail Run program offered by the Danville Department of Parks and Recreation.

I understand that the above-mentioned program involves activity that can be both strenuous and physically demanding and could result in my being physically injured. Such injuries could include strained, sprained or torn muscles, ligaments and tendons, broken bones, head or back injuries, concussions and even loss of life. I understand that this is only a partial list of the injuries I might receive as the result of engaging in this activity.

I understand the importance of following all rules and regulations relating to this activity, including the instructions of the person or persons supervising the activity and/or the requirements of the person or entity responsible for the area where the activity takes place. I agree to follow and comply with all such rules, regulations, instructions and/or requirements.

I understand that it is important that I be in good physical condition when I engage in this activity and I understand that it is my responsibility to maintain an activity level that is compatible with my physical condition and skill level.

I hereby expressly assume the risk of any physical injury or other loss that I might sustain as the result of participating in this activity and my transportation related thereto. I further understand there may be a risk of injury in traveling to and from the area where the activity will take place.

I also release the use of my name, image, or any record of my participation in the event for promotional or publicity purposes without obligation to me.

I also expressly waive and covenant not to sue on any claim I might have against the City of Danville or any officer or employee of the City of Danville, or any volunteer, or the estate or representative of such person for any personal injury or loss I might sustain as the result of engaging in any activity relating to this program whether caused by negligence, breach of contract or otherwise; except that this waiver shall not apply to any claim I might have against the City of Danville or its agents for any such personal injury or loss I might sustain out of the gross and wanton negligence of any such person or entity.

PLEASE READ CAREFULLY BEFORE SIGNING

Signature of Participant Date

Signature of Guardian Date

I have the following physical impairments or medical conditions, including allergic reactions:

I grant permission to the organizers to seek medical attention should the need arise and patient/next of kin cannot be reached by telephone.

Name of individual to contact in case of emergency:

Name _____

Address _____

Phone _____

Signature of Participant

Signature of Parent or Guardian
(if participant is under 18)