



ANNUAL 5K RACE

Saturday, April 26, 2014

Course begins at Mark Watson Park in downtown Sylva, crosses Business 23 onto Old Dillsboro Road, loops into Monteith Park and returns on the same route back to Mark Watson. This is a new route that is much easier, with few climbs; the route includes both paved and graveled road sections.

Awards

- Overall male/Overall female
Top three in each age division, male/female
10 & under / 11-14 / 15-19 / 20-29
30-39 / 40-49/ 50-59 / 60-69 / 70-79 / 80+

Registration Deadlines:

- By April 10th - \$15 includes short sleeved wicking shirt.
April 11th-24th - \$15 does not include shirt
Race Day - \$20 (limited number of shirts will be on sale for additional \$10).

Registration is available at www.imathlete.com.

Forms may be printed from
http://rec.jacksonnc.org,
http://www.downtownsylva.org/, and
http://www.mountainlovers.com.

You can also pick up registration forms at the Recreation Center in Cullowhee.

Race Day Schedule

- 8:00 a.m. registration begins at Mark Watson Park
9:00 a.m. race start
10:00 a.m. awards ceremony

All proceeds support Jackson County Parks & Recreation Department.

Greening Up 5K Entry Form

Mail to: Jackson County Parks & Recreation Dept.
88 Cullowhee Mountain Road
Cullowhee, NC 28723

Name _____

Address _____

Email _____

Age (as of April 26th) _____ Gender _____

Date of Birth _____

T-shirt size (please circle one)

Small Medium Large X-Large XXL

Fees (check one):

Pre-registration (including t-shirt) by April 10th _____ (\$15)

Pre-registration (does not include t-shirt)
April 11th-24th _____ (\$15)

Race day registration _____ (\$20)

Please make checks payable to JCPRD.

Waiver: Upon acceptance of my entry, I for myself, my heirs and assigns, hereby release the JCRPD, sponsors, volunteers, and officials of the Greening Up the Mountains 5K Race from any and all liability arising from illness, injury or death I may suffer as a result of participation in this event. I attest that I am physically fit and have sufficiently trained for this event, and am aware that participation could result in injury. Should officials determine that completion of the event would be injurious to my health, I consent to be removed from the event and treated by designated medical personnel. I agree to accept the decisions of the officials as final. I also grant permission to event officials to use my photograph or any recording of the event for legitimate purposes.

Signature: _____

Parent/Guardian signature for those under 14 years

old: _____

Call Jenifer Pressley at 828-293-3053 or e-mail
jeniferpressley@jacksonnc.org for more information.



JACKSON COUNTY
PARKS & RECREATION DEPARTMENT