



HEINERS BAKERY PRESENTS THE 15TH ANNUAL BUN RUN 5K



HUNTINGTON, WV - VETERANS MEMORIAL BLVD

JULY 27, 2019 AT 8:00AM

RACE DAY REGISTRATION STARTS AT 6:30AM

COURSE: START AT VETERANS BLVD BEHIND PULLMAN SQUARE > LEFT ON 1ST STREET > LEFT ON 5TH AVENUE > LEFT ON HAL GREER BLVD > LEFT ON 3RD AVENUE > RIGHT ON VETERANS BLVD TO FINISH LINE

ENTRY FEES (NO REFUNDS)		
Category	Pre Registered	Race Day
5K Run/Walk	\$20	\$25
SEND FORM & FEES TO: PO BOX 3158, Huntington, WV 25702		

SIGN UP ONLINE AT APTIMING.COM/BUNRUN



AWARDS (NO DUPLICATION)

TOP 2 MALE AND FEMALE OVERALL
TOP 2 MALE AND FEMALE IN EACH AGE DIVISION



Age Divisions

14 & Under, 15-19, 20-24, 25-29, 30-34, 35-39,
40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70+

Name: _____ Age on race day: _____ Gender: Male Female

Address: _____ City: _____ State: _____ Zip code: _____

Telephone: _____ Email: _____

Event: RUN WALK Shirt size: YOUTH ADULT S M L XL XXL

_____ I AM Enclosing an Additional \$ _____ to Help Sponsor the Cabell Huntington Hospital Foundation

Total Amount of Check/Cash Enclosed: _____ Checks Payable to: (WV HOT DOG FESTIVAL)

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 agree to abide by any decision of a race official relative to my ability to safely compete 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 the weather (including cold weather and ice), traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of the acceptance of my entry, I for myself, and anyone entitled to act on my behalf, waive and release The Hoops Family Children's Hospital, Cabell Huntington Hospital Foundation, Cabell Huntington Hospital, The City of Huntington, race officials, volunteers, APTiming, Appalachian Timing Group LLC, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event.

SIGNATURE: _____ DATE: _____

(PARENT OR GUARDIAN MUST SIGN IF PARTICIPANT IS UNDER 18 YEARS OF AGE)

RACE DIRECTOR- RICKY CAMPBELL – RICKY@APTIMING.COM



"YOU, YOUR FAMILY, AND THE FAMILY DOG ARE WELCOME!"