

FRIDAY AUGUST 14, 2015

REGISTRATION BEGINS AT 6PM RUN/ WALK BEGINS AT 7:30PM



All proceeds will benefit The Wounded Warrior Project and locally, the Warrior Hunting Adventures and Healing Waters Fly Fishing for Wounded Warriors

5K Run/ Walk Cost:

Until 5/31/15.....\$20

6/01/15 - 7/31/15.....\$25

8/1/15 - 8/14/15.....\$30

High School & Active Military \$20 Until 7/31/15

T-Shirts: For anyone registered by July 26, 2015

Prizes:

1st Place - \$100

2nd Place - \$75

3rd Place - \$50

Cash prizes for both men's and women's overall finishers. Top 2 finishers of each age group will receive medals. Based on a necessary minimum attendance.

*Early Packet pick-up will be in the registration building on Thursday August 13th from 6-8p.m.

Questions? Contact Max Krumpe 301-992-0388
mkrumpe@krumpesdonuts.com



Racine MultiSports
www.RacineMultiSports.com

This promotion is sponsored by Krumpe's Do-nut Shop, Inc., which is solely responsible for its fulfillment.

Donut Alley Rally 5K Walk/ Run REGISTRATION FORM (Please detach and send in one form per person please)
Register online at www.imathlete.com/events/donutalleyrally

First & Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Gender: _____ Date of Birth: ____/____/____ Age on Race Day: _____

T-Shirt Size (circle one): Youth S M L Adult S M L XL XXL

Age Group (circle one): (under 13) (13-15) (16-19) (20-29) (30-39) (40-49) (50-59) (60-69) (70 & older)

Make Checks Payable to: Donut Alley Rally/ WWP DO NOT MAIL REGISTRATIONS AFTER 8/01/15

Detach and Mail Registration Form & Fee to:

Krumpe's Donut Shop 912 Maryland Avenue Hagerstown, MD 21740

RELEASE & CONSENT FORM: In consideration of the acceptance of my entry/ my child's entry, I for myself or my child our executors, administrators, and assignees... do hereby release and discharge the organizers of this race and all other sponsors and organizers of all claims and damages, actions, whatsoever in any manner arising out of my/ my child's participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event and I/ my child is physically fit and sufficiently trained to participate in this event. Further, I hereby grant full permission to any and all of the foregoing use to use my/ my child's name, photographs, videotapes, motion pictures, recordings or any other record of this event for any legitimate purpose without compensation or remunerations.

Athlete Signature: _____

(Parent/ guardian signature if runner is under 18 years of age)