

To Benefit The Bucks County Heroes Scholarship Fund

BUCKS COUNTY  
**HEROES**  
SCHOLARSHIP FUND

# St. Patrick's Day 5K Run/Walk



Memorial Race Honoring Charles J. Touhill

## At Our Lady of Czestochowa

### Chip Timing and Live Results by CompuScore

#### Race Morning Schedule:

7:30 Registration and Packet Pickup  
9:30 5K Start  
10:30 Timed Kids Mile & Un-Timed Family Mile Walk

#### Amenities:

Traffic-free course entirely on the shrine's 244 acres, *Chip Timing* w/ live results, time texted to your cell phone, professional race announcing, Real bathrooms, Great Atmosphere, Plenty of on-site parking, T-shirts for all 5K & Kids Run entries received by March 1, 2012.

#### Awards:

**5K:** Awards/Certificates for Overall Male & Female plus Age Groups:  
M/F 14 & Under, 15-16, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

**KID'S MILE:** Certificates for Boys & Girls 6&under, 7-8, 9-10, 11-12

Enter today @ **www.CompuScore.com** (no additional fees for online reg!)

5K Race/Walk: \$28 by 3/13/2012, \$35 raceday \* Kid's Mile \$15  
Family Walk (no shirt, no timing): \$10 per person or \$30 per family  
Entry Fees Include **FULL HOT MEAL** for all Participants

**Sat., March 17, 2012**

**654 Ferry Road  
Doylestown, PA 18901**

**Entry Includes  
FULL HOT MEAL!**

**Corned Beef  
& Cabbage,**

**Potatoes,**

**Drinks, &**

**More!**

### St. Patrick's Day 5K Snail-Mail Registration Form (must be rec'd by 5:00pm 3/13/12)

PRINT Name: \_\_\_\_\_ Age (race day): \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ \* Shirt Size: (Circle) S M L XL \* Participating In (Circle): 5K Kids Family Walk

Cell Phone # for texting results: \_\_\_\_\_ Cell Carrier (Verizon, AT&T etc.) \_\_\_\_\_

I hereby certify that I am adequately fit to run and/or walk in the St. Patrick's Day 5K and accompanying 1 Mile walk/runs. In consideration or the acceptance of this entry, I, the undersigned, for myself, my personal representative, beneficiaries, and heirs, knowingly waive, release, and discharge any and all rights and claims which I have or may have hereafter accrue to me or my estate against the National Shrine of Our Lady of Czestochowa and/or any other sponsors, organizers and volunteers and assigns for any and all injuries or death suffered by me in this event. I will also allow my picture to be used in publication as a result of the race.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(A parent or legal guardian must sign for all participants under the age of 18)

Make checks payable to "O.L. of C." and mail with completed form to: O.L. of C., attn: Shawn Touhill, P.O. Box 2049, Doylestown PA 18901