

Not An Ordinary Road Race!



15th Annual Cabin Fever 2 Mile Trek Benefits Marietta City Schools' Cross Country Program Sunday, February 24, 2019 at 2 p.m. Registration: 12:30-1:45 p.m.

Individual Walker/Runner - \$12.00 pre-registration by 2/5 (non-refundable) \$15.00 race day registration

Team Walkers/Runners - \$36.00/team pre-registration 2/5 (non-refundable) \$45.00/team race day registration

Each team member must complete a form. Teams may send one check.

The first 200 entrants will receive a long-sleeved T-shirt. Sizes only guaranteed for those who pre-register.

Individual Awards Run/Walk: Top 3 overall male/female Top 3 masters male/female

Top 3 male/female in the following age groups: 0-10, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

Team Awards Run/Walk: Top 3 - No duplicate awards; team members are not eligible for individual awards.

The Course: Broughton Nature and Wildlife Education Area

This is the home course of Marietta High School/Middle School and Marietta College's Cross Country programs. It is a scenic, traffic-free, 2 mile course that is maintained with one hill.

The start and finish is at the picnic shelter. Plenty of parking is available.

Questions? Call Pam Holschuh at 740.350.1989

Typical winter weather conditions will not cause the race to be cancelled!

Driving Directions: From I-77 take Exit 6. Travel SR 821 South for 2.5 miles. Turn right into the parking area. OR
From SR60 travel SR 821 North for .6 of a mile. Turn left into the parking area.

2019 Cabin Fever 2 Mile Run/Walk Registration Form

Last Name: _____

First Name: _____

Address: _____

City _____ State _____ Zip Code _____

Phone _____

T-Shirt Size: S M L XL XXL

Birth Date ____/____/____ Sex: Male Female Event: 2 mi Run 2 mi Walk Team Run Team Walk

Age: 0-10 11-14 15-19 20-29 30-39 40-49 50-59 60-69 70+

Team Names: 3 per team any age and gender. Each person must fill out a form and turn in registrations together.

1. _____ 2. _____ 3. _____

Waiver: In consideration of acceptance of this entry, I waive myself, my heirs, and assigns, all rights and claims for damages which I might have against Marietta City Schools Cross Country and all other individuals and organizations associated with this race for all injuries which may result from my participation in this event. I attest and verify that I have full knowledge of the risk involved in this event and am physically fit and sufficiently trained to participate. I have read the above statement, I understand it, and my signature confirms its full acceptance.

Signature of Participant/ Parent or Guardian Signature if Under 18

Date

PAYMENT (do not send cash)
Payments made to:
Marietta City Schools
Mail checks and applications to
Pam Holschuh
415 Gilman Avenue
Marietta, OH 45750