

2024 Thad Davis Memorial 5K Run/Walk

12th ANNUAL

Presented by AC Alumni Association and AC Cross Country/Track Teams

June 15, 2024

Amanda-Clearcreek High School

The Thad Davis Memorial 5K Run/Walk is a fund-raising event planned by the AC Alumni Association and AC Cross Country/Track Teams. The race will take place on an awesome (relatively flat!) course around the streets of Amanda, OH.

KIDS FUN RUN AT THE FINISH LINE

Events Schedule

Location: AC High School Front Entrance (look for signage)
Packet Pick-up & Race-day Registration 6:30 a.m.
5K Run/Walk 8:00 a.m.
KIDS FUN RUN conclusion of 5K
Awards completion of race

5K Overall & Age Group Awards

Awards will be presented to the 1st, 2nd, & 3rd overall Male and Female finishers.

Age Group Awards will be presented to the top three finishers in each age category: 14 & under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, and 70+.

All registered participants are eligible for terrific door prizes.

Thank you to our previous sponsors:

Major: Mid West Fabricating, Heaston's Heating & Cooling, Elsea Inc

Other Sponsors: Kingston National Bank, Taylor-Theller Funeral Home, Phillips & Friedrich Dentistry, Tilley Family, Dave Tawney (Attorney at Law), Tom & Vickie Davis

Registration:

ONLINE REGISTRATION— Visit: www.thaddavis5k.com

Entry Fee:

Prior to Race Day—JUNE 5, 2024 to guar. T-shirt size
\$25.00 - cotton t-shirt
\$32.00 - moisture wicking performance t-shirt—**ONLY**

AVAILABLE IF REGISTERED BY JUNE 5

Race Day

\$30.00 - cotton t-shirt **ONLY**

KIDS FUN RUN (up to age 10-race day sign-up) - FREE

All pre-registered 5K participants are guaranteed a T-shirt.

Make Checks payable to AC Alumni Association.

Contact Information:

For additional information, call Ron Butterbaugh, President of AC Alumni Association @ 740-708-9075 or Kyle Wright, Head Cross Country Coach at ACHS @ 740-689-7937 or Dan Schoenlein @ 740-654-0293.

AC Thad Davis Memorial 5k

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (____) _____ Male _____ Female _____

Email Address: _____

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

Cotton T-shirt (\$20 entry fee) Performance T-shirt (\$27 entry fee) Size: S M L XL

Emergency Contact: _____

Phone: (____) _____

I understand that running or walking in this event is a potentially hazardous activity. In consideration of your acceptance of my entry, I, for myself (my child) and anyone acting on my behalf, waive, release, and hold harmless, all sponsors, officials, volunteers, and their representatives, and successors of the Thad Davis Memorial 5K from any and all claims of injury or liability of any kind resulting from my (my child's) participation in this event. I realize that this is a strenuous event that requires proper physical conditioning for participation. I hereby certify that I (my child) am/is in such physical condition.

Athlete's Signature: _____

Parent Signature: _____

(Parent's signature required if runner is under 18 years of age.)

MAIL Check and Entry Form to:

AC Alumni Association
PO Box 275
Amanda, OHIO 43102

Make Checks Payable to AC Alumni Association