



# Live Long Lyndhurst Egg Run 5K Run/Walk

Saturday, April 19, 2014

A Special Event for the **Whole Family** | **Featuring Chip Timing**

Proceeds to benefit the Hillcrest Family YMCA in their efforts to provide community support to those unable to participate in programming without it.

Light refreshments provided by Legacy Village after the Run for participants.

### Place

Race begins and ends at Legacy Village, parking will be available onsite.

### Fees

Through end of February: \$20.00;  
March thru day before race: \$25.00  
Race day: \$30.00

### Time

- 7:00 a.m. – Check in, Legacy Village center courtyard
- 8:00 a.m.– L'il Leggs Run, free for kids under 4
- 8:15 a.m.– 5K (3.1 miles) Run/Walk begins, strollers and walkers are permitted
- 9:30 a.m.– Awards and recognition

### To register

Online log onto [LiveLongLyndhurst.com](http://LiveLongLyndhurst.com) by Thursday, April 17 at midnight. Mail or drop off registration at the Hillcrest YMCA, 5000 Mayfield Road, by April 17.

Registration packet pickup at Second Sole, 5114 Mayfield Road Lyndhurst, OH 44124, on Friday, April 18, between noon and 8 p.m.

### Awards

Awards provided for Top overall male and female. Top finisher by age group: 15 and under; 16-20; 21-29; 30-39; 40-49; 50-59; 60 and over.

Guaranteed shirts for first 250 participants for the 5K Walk/Run. Refreshments available for the participants at the end of the Run.



\* Children must have adult supervision at all times.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

*In consideration of your accepting this entry, I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Aetna, Cleveland Clinic Foundation, Cleveland Metroparks, City of Lyndhurst, The Fidelity Group, Legacy Village, The YMCA, Second Sole, their representatives, successors, and assigns for any and all injuries suffered by me in said event or in transit to and from said event. I further attest that I am physically fit and have sufficiently prepared for this event. I will additionally permit the use of my name and/or pictures in the Cleveland Clinic's publications.*

Signature \_\_\_\_\_

M  F Date of birth \_\_\_\_\_

Age on day of race \_\_\_\_\_  5K Run  Walk

Adult T-shirt size:

S  M  L  XL  XXL

Child T-shirt size:

S  M  L

Send entry form and make checks payable to:

Hillcrest YMCA  
5000 Mayfield Rd  
Cleveland, OH 44121

For information, log onto  
[www.livelonglyndhurst.com](http://www.livelonglyndhurst.com)

