



5k & 1 Mile Run/Walk

Wapakoneta, Ohio - **Monday, July 4th, 2022**

5K - 9:00 a.m. Start

1 Mile Run/Walk - 9:01 a.m. Start

Registration begins at 7:30 a.m.

Hosted by: *Friends of the Wapakoneta Public Library & St. Joseph Festival*

COURSE: **5K** – Starts & finishes at the **Auglaize County Fairgrounds** (1001 Fairview Dr, Wapakoneta). Registration will be near the Commercial Building at the North end. The race starts at the front of the fairgrounds, continues throughout Wapak

1 Mile - Fun Run /Walk 1 mile on the same route as the 5k and turns around at Scoops & returns to the Fairgrounds.

AWARDS: **NEW! ALL PARTICIPANTS WILL RECEIVE A COMMERATIVE MEDAL**
Cash awards to the top male & female in the 5k Run/Walk.
Prizes for most patriotic.

5K – Prizes to the top male and female runners in each age group
(Age Groups: 13 & under, 14-20, 21-30, 31-40, 41-50, 51-60, 61-70, 71 & Over)

COST: \$25.00 (includes t-shirt) shirt not guaranteed after June 15.
\$30.00 On Race Day (shirt & medal not guaranteed)

HOW TO REGISTER: Register online at www.cantstoprunningco.com

Or... **Return entry to:** FIRECRACKER 5K, 1301 Bellefontaine St., Wapakoneta, OH 45895. Make checks payable to: WAPAKONETA FIRECRACKER 5K - Refunds will not be permitted.

FUN: St. Joseph Festival Beer Tent will be OPEN following the race

For more information: Email wapakfriends@auglaizelibraries.org
Becky Niekamp (419-305-3501) Barb Harrod (419-773-0050)
Lisa Block (317-258-1422) Beth Steiner (419-773-9101)

WAPAKONETA FIRECRACKER 5K & 1 Mile Run/Walk

PLEASE PRINT

NAME: _____

Choose: 5K 1 Mile

BIRTH DATE (MM/DD/YYYY) _____

AGE: (race day) _____

ADDRESS: _____

PHONE #: _____

CITY, STATE: _____

ZIP: _____

EMAIL ADDRESS: _____ Gender: (circle) Male Female

SHIRT SIZE: (circle) ADULT - S M L XL XXL (\$2 extra) CHILD Size - S M L XL

EMERGENCY CONTACT NAME _____ PHONE# _____

I hereby release Friends of the Wapakoneta Library, St. Joseph Catholic Church and St. Joseph Parish Festival, Auglaize County Public District Library (ACPDL), all sponsors, coordinating groups, and all individuals associated with St. Joseph Parish, ACPDLs, and their representatives, from any and all claims that may arise as a result of my participation in this event. I certify that I am physically fit and assume all risks associated with my participation in this event.

DATE- _____ SIGNATURE- _____

(Parent signature if entrant is under 18)