

Registration Information:

Phone: 574-967-4449

Fax: 574-967-3848

cccdirector@centurylink.net

Registration & Fee:

Advanced registration preferred. Entry form and fees should be received at the Carroll County Community Center, 908 E Columbia St, Flora, IN 46929 on or before Thursday, August 2, 2018. T-shirt guaranteed only through 7/25/18.

Register online at: www.GetMeRegistered.com

or go to our website @ www.carrollcountycommunitycenter.com for form

Packet Pick -Up:

Walk-in packet pick-up will be available at the CC Community Center Friday, August 3, 2018 from 12 Noon-6pm or you may pick up packet morning of race.

Awards & Finish Line: (MUST give age on entry form to receive award)

Gift Certificate & Trophy to Top Male & Female finishers in 5K. Awards to all finishers in Wheel Chair Division. Trophy to 1st Place in each age group and division; medals to 2nd & 3rd Place. Award to all Youth Run finishers.

Quality t-shirt. Refreshments at end of race, chance for door prizes and Awards Ceremony. (must be present to win)

Race numbers MUST be worn on front of shirt or shorts and visible when crossing finish line. Showers available at the Carroll County Community Center. Each participant in 5K will be chip timed by Franklin Finish.

Race Proceeds:

Proceeds will benefit the Carroll County Community Center.

Information:

Call the CCCC, 574-967-4449
Amanda Harness, Race Director
Or email: cccdirector@centurylink.net

Race Results: Posted online soon after finish @ www.franklinfinish.com

SCHEDULE OF EVENTS

6:30-7:30am	Race Day Registration
8:00am	Youth ½ Mile Run
8:25am	5K Wheelchair Division
8:30am	5K Run or Walk
9:30am	Door Prize Drawings
10:00am(approx)	Awards Ceremony

Please support our sponsors:

- BGI Fitness
- Coca-Cola
- Carroll White REMC
- Eagle Signs & Awards
- First Farmers Bank & Trust
- Fleet Feet Sports
- Hodson 's Bay Company
- Jones Family Dentistry
- Mann Chevrolet-Buick-GMC
- Purdue Athletics
- RME Insurance
- Salin Bank

OFFICIAL ENTRY FORM:

PLEASE PRINT

Male or Female

Name _____

Address _____

City _____

State _____

Zip _____

Phone _____

Age _____

Date of Birth _____

Email Address _____

RACE

- 5K Run/Walk
- Youth ½ Mile (ages 12 & Under)
- 5K Wheelchair

- | | | | |
|-----------------------------|----------------------------|----------------------------|------------------------------|
| Youth | | Adult | |
| <input type="checkbox"/> XS | <input type="checkbox"/> M | <input type="checkbox"/> S | <input type="checkbox"/> XL |
| <input type="checkbox"/> S | <input type="checkbox"/> L | <input type="checkbox"/> M | <input type="checkbox"/> XXL |
| | | <input type="checkbox"/> L | |

AGE DIVISIONS

- | | | | | | |
|-------------------------------------|--------------------------------|--------------------------------|--------------------------------|--------------------------------|----------------------------------|
| <input type="checkbox"/> 13 & under | <input type="checkbox"/> 18-24 | <input type="checkbox"/> 30-34 | <input type="checkbox"/> 40-44 | <input type="checkbox"/> 50-54 | <input type="checkbox"/> 60-64 |
| <input type="checkbox"/> 14-17 | <input type="checkbox"/> 25-29 | <input type="checkbox"/> 35-39 | <input type="checkbox"/> 45-49 | <input type="checkbox"/> 55-59 | <input type="checkbox"/> 65 & up |

Advanced Registration

- Youth ½ Mile \$15
- 5K Run/Walk Race \$25
- Wheelchair \$15
- Family \$50
- (each family member MUST have separate entry form)

Race Day Registration

- Youth ½ Mile \$20
- 5K Run/Walk Race \$30
- Wheelchair \$20
- Family \$60
- (each family member MUST have separate entry form)

I, the undersigned, fully recognize the inherent and potential risks of these races at the Carroll County Community Center, and fully understand that it is not the exclusive purpose of these races or their officials, sponsors, and directors to serve as guardians of my safety.

I hereby release the Carroll County Community Center, its Board of Directors, Race Sponsors, Race Director, workers, or assigns from any liability arising from any occurrence, whether foreseen or unforeseen, in connection with these races which may result in injury, death, or any other damage due to my participation or association in these races and further waive any claim by me or my family estate, heirs, or assigns, arising from an accidental occurrence.

I further assume full responsibility for my physical fitness and capability to perform under normal conditions of these races.

Signature (Parent if under 18) _____

Date _____

Make Checks Payable & Mail entries to..... **Carroll County Community Center**
908 East Columbia St. Flora, IN 46929

OR Register online at: www.GetMeRegistered.com



Lafayette to Flora -	27 miles
Kokomo to Flora -	26 miles
Indianapolis to Flora -	66 miles
South Bend to Flora -	89 miles

9th Annual Harvest Hustle 5K & Youth Runs

Phone: 574-967-4449
 Fax: 574-967-3848

Carroll Co Community Center
908 E Columbia St
Flora, IN 46929

Carroll County Community Center 9th Annual



RUN/WALK & YOUTH ½ MILE

Saturday
August 4, 2018

Youth ½ Mile	8:00am
Wheelchair Division	8:25am
5K Run or Walk	8:30am

5 Year Age Divisions, Wheelchair & Run/Walk Divisions
All youth 1/2 mile finishers receive an award
Prizes & Awards to 1st Place overall male & female
Winners in age Divisions

Start at the Flora Park Soccer Field and
 Finish at Carroll County Community Center, Flora, IN