RUN and WALK AWARDS

First three overall male/female.
First masters male/female.
Top three of the following age groups:

14 & under	30-34	50-54
15-19	35-39	55-59
20- 24	40-44	60-64
25-29	45-49	65-69
		70+

T-Shirt to all entrants

DOOR PRIZES, Must be present to win!

Registration: Friday, 4/15 from 7:00 to 9:00 PM and Race day from 6:30 to 7:45 AM at the Vienna Communtiy Building in Jackson Park. Kids signup will continue until 9:00 AM at the track.

TEAM COMPETITION

There will be one award for School and Church teams based on the number of team finishers. All team members are eligible for all other awards.

All team members need to fill out entry.

You may be on only one team!

WHEELCHAIR DIVISION

There will be one award in the Wheelchair Division awarded to the first male or female.

The Wheelchair Start Time will be 7:55 AM.

RIVER CITY KID'S RACES

AGE	DISTANCE
3 and Under	50 Meters
4 and 5	100 Meters
6, 7	200 Meters
8, 9	400 Meters
10,11	400 Meters

Participant ribbon to all kids!

River City Runners & Walkers Club
P. O. BOX 4496
Parkersburg, WV 26104
Return Service Requested

VIENNA RIVER ROAD RACE

5 MILE RUN & 5K WALK—8:00 & 8:05AM
SATURDAY APRIL 16, 2011 VIENNA, WV

SPONSORED BY

St. Joseph's Hospital

Sign up early for special gift

FREE KIDS RACES
RIVER CITY KID'S RACES 9:00 AM

PART OF THE RIVER CITY RUNNERS AND WALKERS SERIES and THE RIVER CITY KID'S SERIES

COURSE INFORMATION

Water: Available at 2 miles and 3-1/2 miles in the run and midway in the walk. At the finish line there will be water, sports drink and a snack.
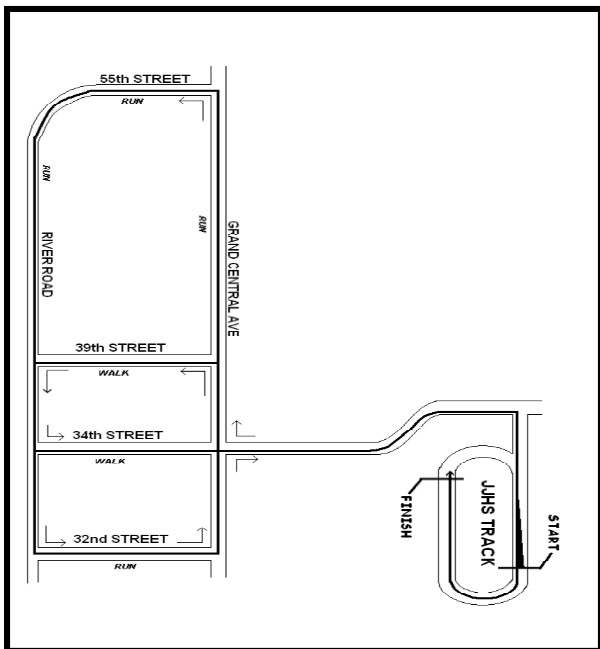
Restrooms: Located at The Vienna Community Building and at the Jackson Track.

Split Timers: Every mile in both events

Both the run and walk are rolling closed loop courses that start and finish on the Jackson Track. The surface is paved except for the track that is crushed limestone.

Both courses are *USATF* certified
RUN: WV09001MS , WALK: WV98-012RT

Vienna River Road
5 Mile Run / 5K Walk

DATE & TIME: April 16, 2011
Run 8:00 A.M., Walk 8:05 A.M.

$12.00 posted by April 9
$10.00 for RCR&W Club members

$15.00 after April 9 and race day.
No race day discounts.

INFORMATION: Louis Molinaro 304 295-5088

Make check payable to River City Runners Club
P.O. Box 4496, Parkersburg, WV 26104

There will be a $20 Service Charge on all returned checks.

_____**MALE FEMALE**
Name   (*circle one*)

_____**RUN   WALK**
Address   (*circle one*)

_____
City, State, Zip

_____/_____/_____
Phone   Date of Birth   Age on Race
Day

TEAM INFORMATION

_____**CHURCH   SCHOOL**
TEAM NAME   **CIRCLE ONE**

SHIRT SIZE: [S] [M] [L] [XL]

WAIVER: In consideration of acceptance this entry to the Vienna River Road Race and the River City Kids races, I waive all claims for myself, my heirs and assigns against **the River City Runners & Walkers Club, the City of Vienna, St. Joseph's Hospital and the River City Kid's Race sponsors and promoters** for injury or illness which may result from my participation. I attest and verify that I have full knowledge of the risk involved in these events, that I 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   Date

_____
Parent/Guardian if under 18 years old

River City Kid's Races

Free Entry   Free Entry

DATE & TIME: April 16, 2011 9:00 A.M.

INFORMATION: Louis Molinaro 304 295-5088

Mail entry to River City Runners Club
P.O. Box 4496, Parkersburg, WV 26104

_____GIRL BOY
Name   (*circle one*)

_____
Address

_____
City, State, Zip

_____/_____/_____
Phone   Date of Birth   Age on Race Day

SHIRT SIZE YOUTH   [S] [M] [L] [XL]

WAIVER: In consideration of acceptance this entry to the Vienna River Road Race and the River City Kids races, I waive all claims for myself, my heirs and assigns against **the River City Runners & Walkers Club, the City of Vienna, St. Joseph's Hospital and the River City Kid's Race sponsors and promoters** for injury or illness which may result from my participation. I attest and verify that I have full knowledge of the risk involved in these events, that I 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 Parent or Guardian   *Date*