

CABVI's

17th Annual

"Yes You Can"

5K



to benefit

Cincinnati Association for the
Blind & Visually Impaired



Sunday,
August 14, 2016
8:30 a.m.

**SPRING GROVE CEMETARY
AND ARBORETUM**
4521 Spring Grove Avenue,
Cincinnati, OH 45232

THE COURSE – This USATF-certified course is a 3.1 mile (5K) paved roadway through the wooded grounds.

THE CAUSE – The Cincinnati Association for the Blind & Visually Impaired offers information, rehabilitation and employment services to help persons who are blind or visually impaired develop skills to live independently.

THE AWARDS – Overall men and women award winners in the running and walking divisions, and the top two (2) in each of the following: Run division – Men and women runners: 14 & under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70/over and Walk Division: 29 & under, 30-39, 40-49, 50-59, 60/over. Visually impaired participants: top 3 men and top 3 women. Wheelchair participants: top man and top woman.

FUN FOR ALL! – A short KIDS' FUN RUN will be held after CABVI'S "Yes You Can" 5K for children up to age 8 – no registration, no fee.

REGISTRATION – Pre-registration is \$25 and includes a T-shirt. Mail-in pre-registration should be postmarked by August 4, 2016 and online pre-registration should be submitted by 5:00 p.m. on August 10th. Registration the day of the event is \$30 and includes a T-shirt (while supplies last). Registration begins at 7:00 a.m. just inside the Spring Grove Avenue entrance. The race begins at 8:30 a.m. Online registration available at www.sprunning.com.

PACKET PICK-UP – Saturday, August 13th at Bob Roncker's Running Spot (1993 Madison Road, Cincinnati, OH 45208) from 10:30 a.m. to 2:30 p.m. You can pick up your T-shirt and race materials at this time, or register for the event! Pre-register online at www.sprunning.com.

FOR MORE INFORMATION – Call Steve Prescott at 513-777-1080.

17th Annual CABVI's "Yes You Can" 5K

August 14, 2016 • 8:30 a.m.
Spring Grove Cemetery and Arboretum

Official Pre-Registration Form

First Name _____

Last Name _____

Street _____

City/State/Zip _____

Daytime Phone _____

Evening Phone _____

Email _____

Sex: Male Female

Age (as of 8/14/16) _____

(Age must be provided to qualify for awards.)

Category: Runner Walker

Visually Impaired Participant

(Select all that apply.)

\$25 Pre-Registration (includes T-shirt)

Circle T-shirt size: S M L XL XXL

Enclosed is a \$_____ donation to CABVI.

Total amount enclosed: \$ _____

Make check payable to:

CABVI

List medical conditions: _____

In case of medical emergency contact:

Phone: _____

Referred by: _____

WAIVER: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in CABVI's "Yes You Can" 5K and do hereby release the race director, Steve Prescott, USATF, Spring Grove Cemetery and Arboretum, the Cincinnati Association for the Blind & Visually Impaired and all sponsors, workers, officials, and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all the rules for participation and acknowledge that the Race Committee may refuse or return my entry at its discretion. I understand the risks for such an event, and have trained adequately in preparation. I HAVE NOTED ANY MEDICAL CONDITION ON THIS FORM.

Entry Signature

(parent signature required for those under 18)

Name

Date

Mail this form and check to:

CABVI's "Yes You Can" 5K

c/o Steve Prescott

P.O. Box 454

Mason, OH 45040

Pre-Registration must be postmarked by
August 4, 2016.

Information and race results are available
at www.sprunning.com.