

About Us

The DV Turkey Trot 5k Run/Walk supports the Local Food Pantries and the DV Cross Country Teams. We are asking all runners and walkers to help prevent hunger this year by bringing a non-perishable food item to the event. A portion of the race proceeds will also be donated to our local food pantries.



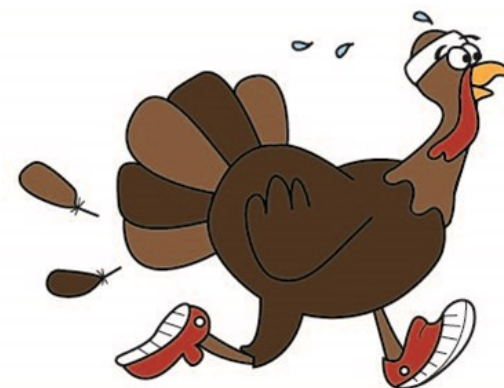
Join us for a
gobblin' good
time!



DV Cross Country
Booster Club

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DV Turkey Trot



Saturday, November 19, 2016

9:00am Registration

10:00am 5K Run/Walk

Kids Run to Follow

More information at:

<http://dvturkeytrot.wix.com/dvturkeytrot>

Online Registration:

<http://www.active.com>

Search: DV Turkey Trot

The Details...

Location

Delaware Valley High School
252 Route 6 & 209
Milford, PA 18337

Entry Fees (non-refundable)

\$20 Pre-register by November 5, 2016

Includes T-shirt, food ticket, and
goodie bag

\$25 Registration November 6-19

Includes food ticket. T-shirt and
goodie bag are NOT guaranteed

Course Scenic flat cross country
course with track finish.



Awards

Top Male and Female:

* Frozen Turkey

Age Groups:

* Unique Age Group Awards for
the Top 3 Males & Females

* 8 & under

* 9-11

* 12-15

* 16-19

* 20-29

* 30-39

* 40-49

* 50-59

* 60-69

* 70+

Fun Run:

* Finishers Ribbon

Raffle

Raffle tickets are available for purchase at the event. Top prizes include \$100 Cash, Gift Cards and various prizes.

DV Turkey Trot – 5K Run/Walk

Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Gender: _____ Age on Race Day: _____

_____ 5k _____ Fun Run

T-Shirt Size: S M L XL

Amount Enclosed: \$ _____ (Non-refundable) (Nov. 6—Race Day: \$25)

Please make all checks payable to **DV Cross Country**. Mail registration forms and checks to:

DV Cross Country
252 Route 6 & 209
Milford, PA 18337

General Release & Hold Harmless Agreement must be read and signed by all race participants. In consideration of my participation in the event, I waive any and all claims for myself and my heirs against the Delaware Valley School District, the sponsors, race workers, and officials of this race from any and all liability arising from illness, injuries, or other damages I may suffer as a result of participation in such event whenever discovered. I affirm that I am physically able and have sufficiently trained for participating in the event and am aware that participation in this event could, in some circumstances, result in severe physical soreness and injury. I also give permission for the free use of my name and picture in any broadcast or written account of the event. I understand that my entry fee is NON-REFUNDABLE. Should race officials determine that completion of this event would be injurious to my health, I consent to being removed from the course and treated by the medical personnel in attendance or at their direction.

Participant or Parent/Guardian Signature: _____

Date: _____