

run WITH YOUR heart TRAIL CHALLENGE

8K & 15K



to benefit the **Center for Families and Children**

Valentine's Day Sunday • February 14, 2010

Race start: 8K will begin at 9:30 A.M., followed shortly by the start of the 15K

www.c4fc.org/trailrun



Making success possible for people who choose to change their lives
Early Learning
Youth Development
Behavioral Health

♥course 8K/4.9 miles

15K/9.3 miles

RFID timing system by Cleveland Plays Racing

Course limited to first 200 registrants

♥where

Cleveland Metroparks,
 North Chagrin Reservation,
 Willoughby Hills, Ohio
River Grove Picnic Area on Chagrin River Road,
 in between Chardon & Wilson Mills Roads

♥packet pickup

Friday, 2/12 @ CFC
 4500 Euclid Ave. • Cleveland, OH 44103
 11 A.M. to 2 P.M.

Saturday, 2/13 @ Second Sole
 5114 Mayfield Road • Lyndhurst, OH 44124
 11 A.M. to 2 P.M.

Sunday 2/14 @ Race Start
 River Grove Picnic Area • Chagrin River Road
 Willoughby Hills, OH 44094
 8 to 9 A.M.

♥race perks

Beautiful, well-marked, Cleveland Metroparks course with a great chance for cold temps and snow!

- All registrants receive **heavy-weight nylon, zippered tote bag** and a **winter hat**
- Post-race party following with food and hot beverages and raffle for all pre-registered runners
- 2 enclosed heated shelters and 1 open shelter with roaring fireplaces at race start/finish
- 4 bathrooms at race start/finish
- Multiple water stops
- Race photographer and music on course
- Opportunity to sample the course with group training runs (*details to be emailed to registrants and published at www.c4fc.org/trailrun*)

♥more info

www.c4fc.org/trailrun

Race Director Beth TreCasa: 216/325-9306 • btrecasa@c4fc.org

Mail completed form with check payable to **Cleveland Plays Racing** (2316 Mullberry Ave. • Cleveland, OH 44113) or register online: www.clevelandplaysracing.com



NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

CHECK ONE: male female **AGE ON RACE DAY:** _____

PHONE: _____ **EMAIL:** _____

EMERGENCY CONTACT NAME: _____ **PHONE:** _____

WAIVER: I certify that I am physically fit and capable of participation in this event. I understand that trail running is a potentially dangerous activity including snow and/or ice and/or mud and assume full responsibility for any injury or accident, which may occur during my participation in Run with your Heart Trail Challenge. I, the undersigned, hold harmless the Cleveland Metroparks, Cleveland Plays Racing, race director, the Center for Families and Children (CFC), its employees and volunteers. I give my full permission to CFC to use any photos, video and other records of me that are made during the event.

 signature (parent/guardian if under 18) date

	8K	15K	
Early Bird	<input type="checkbox"/> \$20	<input type="checkbox"/> \$25	online or postmarked by 12/31/09
Pre-Registered	<input type="checkbox"/> \$23	<input type="checkbox"/> \$30	postmarked by 2/8/10 online by 2/12/10
Race Day	<input type="checkbox"/> \$25	<input type="checkbox"/> \$33	if available, starting at 8 A.M., closing by 9 A.M.

I have added \$ _____ to my entry fee to support the Center for Families and Children

THANK YOU!