



Roosevelt Run 5K

Thursday, August 20, 2020, 6:30 PM

Theodore Roosevelt Island parking lot
Down the ramp from Gateway Park in Rosslyn
GPS address: 1201 Lee Highway, Arlington VA 22209
Run along the Potomac River



☎ **703-927-4833** 📄 On-line at www.safetyandhealthfoundation.org/roosevelt

- Awards to top 3 overall and age group winners (M/F)
- Downhill, then flat and scenic
- Showcases Potomac River
- Includes post-race refreshments and awards
- Follows Mount Vernon Trail under Roosevelt Bridge, & Memorial Bridge to Navy-Marine Memorial and back
- Accessible by car only from NORTHBOUND George Washington Memorial Parkway
- Accessible by foot or bicycle from trailhead of Mount Vernon Trail, at Rosslyn end of Key Bridge (address 1201 Lee Highway)
- Look for a small green sign that says **MOUNT VERNON TRAIL →**
- Run past Theodore Roosevelt Island and Franklin Roosevelt Memorial in West Potomac Park on other side of the river
- Benefits Safety And Health Foundation's educational programs
- Low-key event, Limited to the first 50 entrants
- Park in Rosslyn or Georgetown;
- Start line is a short walk from Rosslyn Metro on the Blue/Orange Line
- 5:45 PM to 6:15 PM – Sign-in
- 6:30 PM – Roosevelt Run 5K
- 7:15 PM – Results and awards

Roosevelt Run 5K • REGISTRATION FORM

Make checks payable to SHF, 611 South Ivy Street, Arlington VA 22204

Name _____ Gender (M F) Age as of 08/20/2020 [__ __]

Address _____ Birthdate ____ - ____ - _____ (mm-dd-yyyy)

City ST ZIP _____ Phone _____ - _____ - _____

E-mail _____

Enclosed is my entry fee:

\$5 for Tidal Basin Run members by August 13 \$10 for non-members by August 13 \$20 for all after August 13

Enclosed is an additional tax-deductible donation of \$_____ to SHF

By entering this event, I agree, warrant and covenant as follows: I know that running is a potentially hazardous activity. I should not enter or run in club activities unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, CONTRACTION OF ILLNESS, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application I, for myself and anyone entitled to act on my behalf, waive and release Safety and Health Foundation, ACE Physical Therapy & Sports Medicine Institute, LLC, Arlington County Virginia, National Park Service, Road Runners Club of America, USATF, and all sponsors, their directors, officers, employees, agents, representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I acknowledge that the application fee shall be non-refundable. I agree that the sponsors of this event may use my name and likeness for publicity purposes.

Signature _____ (parent or guardian, if under 18) Date _____