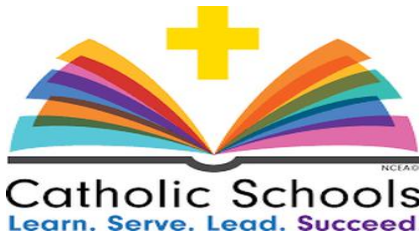


HOLY  FAMILY
CATHOLIC SCHOOL



5K Run/Walk
March 21, 2026
Saturday 8am
Holy Family School
932 Winchester Avenue
Ashland, KY

Proceeds go to scholarships and technology!

<p>8am On-Site Registration \$25 Before March 9th \$30 March 9th Thru March 19th \$35 Day of Race</p>	<p>Wear your green! Special prizes for best costumes! Race shirts guaranteed to all registered Breakfast pizzas from Rocky Top Buffalo Creek In Kenova!</p>	<p>Registration in the Holy Family School gym. Runners will walk to the mall after they register. They will walk back to the gym after finishing. Awards ceremony in the gym. Course: Flat and fast. Starts and ends in Town Center Mall. Around the outer rim of the mall parking area three times.</p>
<p>Trophies to first three overall male and female finishers. Awards to first three finishers in each male and female age group. Award for the first stroller. <i>No duplication of awards</i> Age Groups: 9 and under 10-14 15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-74 75-79 80+</p>	 <p>Race Director: Alan Osuch <u>OsuchRacePlanner@aol.com</u> or 606-369-4403</p>	<p>Please make <u>check payable to:</u> <i>O Such Race Planners</i> Memo: <i>Leaping Leprechaun</i> Please mail registration to: Leaping Leprechaun 5K c/o Alan Osuch 5024 Williams Avenue Ashland, KY 41101</p>

***** Cut here *****

Leaping Leprechaun 5K

Name: _____ **Address:** _____
Email: _____
Phone: _____ **Gender: M F** **Age on race day:** _____
Shirt Size _____ **(2X, 3X, 4X add \$2.00)** **Donation** _____ **Amount Enclosed\$** _____

WAIVER: I know that running a road race is a potentially hazardous activity and I should not enter a run unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event, including but not limited to. falls, contact with other participants. the effects of weather (including high heat or humidity), traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, I release the City of Ashland, Holy Family Church and School, O Such Tri-State Race Planners, TriStateRacer.com timing, race officials. volunteers and all sponsors from all claims to liabilities arising out of my participation in this event.

Signature: _____ **Date:** _____
Parent/Guardian (For minor): _____