



**Potomac Valley Track Club
Go Fourth 8K (4.97 miles)
Thursday, July 4, 2024, at 7:30 AM
Bluemont Park South Shelter
325 North Manchester Street, Arlington VA**



- **Event:** Go Fourth 8K Run and Race Walk on flat W&OD Trail
- **Entry Fee:** At www.pvtc.org or by mail by June 18: \$10 (PVTC members) \$15 (non-members)
At www.pvtc.org or by mail by July 2: \$20 (PVTC members) \$20 (non-members)
- **Join us!** Join **Potomac Valley Track Club** for \$20 at www.pvtc.org/join- save \$5 on our races
- **Race-day:** On-site registration opens at 6:45 AM
- **Course:** Mostly flat -- walker- and wheelchair-friendly
All on paved park trails
- **Parking:** 72 spaces at Bluemont Park South Shelter; more on 500 block of North Manchester;
66 spaces at Bluemont Park North Shelter, 601 North Manchester Street;
200 spaces at Ashlawn School, 5950 North 8th Road
- **Race size:** About 200. No time limit.
- **Awards:** Patriotic awards for top 3
in 10-year age groups (men and women), plus racewalkers
- **Post-race:** Refreshments to keep you cool
- **Contact:** Mike Cannon – pvtracedirector@gmail.com – 910-261-8446

Go Fourth bib number
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PVTC ENTRY FORM

Send form and check to
PVTC, 611 South Ivy Street, Arlington VA 22204
or bring this form with you on race day



Name _____ Age on race day _____ M/F _____
 Address _____ Birthdate _____, _____
 City, State, ZIP _____ Phone _____
 E-mail _____

Enclosed is \$10 (PVTC members) \$15 (non-members) by June 20
 Late Entry \$20 (PVTC members) \$20 (non-members) on or after June 20
 Here is an additional \$20 for membership (then take the member price)
 Here is an additional donation of \$ _____. Total enclosed: \$ _____
 I will help as a volunteer. Please call me.

I know running a race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relevant to my ability to safely complete this event. I assume all risks associated with running in this event, including, but not limited to: falls, contact with other participants, effects of the weather, including high heat and/or humidity, and conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release all sponsors, including Northern Virginia Regional Park Authority, Fairfax County Virginia, Town of Vienna Virginia, their elected and appointed officials and employees, Potomac Valley Track Club, RRCA, and USATF, their officers, directors, agents, and employees, and all officials of this event 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 understand this event is conducted under the regulations of Northern Virginia Regional Park Authority. I agree to release my name and photo for publicity purposes. I agree that my entry fee is non-refundable. I agree that my name and address may be provided to the sponsors of this event. Parent or guardian must sign for children under 18.

Signature (Parent or Guardian if under 18) _____ Date _____