

# 7th ANNUAL SCOTT SMITH MEMORIAL RUN/WALK

12/3/2022 8:00 AM

Ma & Pa Trail, 4 Newport Drive – Forest Hill MD



**Co-Race Directors:** Taras Vizzi, Donna Lewis  
scottsmithmemorial@gmail.com

**PRE-RACE DAY REGISTRATION &  
PACKET PICK-UP 12/2/2022 3:30-6:00 PM  
BEL AIR CHARM CITY RUN STORE**

**RACE DAY REGISTRATION & PACKET PICK-UP  
6:30 -7:30 AM at Ma and Pa Trail,  
4 Newport Drive, Forest Hill MD**

**Race Fee:**  
Adults – \$25  
Middle and High School Students - \$15



**PLEASE MAKE CHECKS PAYABLE TO:  
SCOTT SMITH MEMORIAL FOUNDATION, INC.  
MAIL FORM BELOW TO:  
JEN STAGNOLI  
940 GAINSBOROUGH CT. BEL AIR, MD 21014**

## RACE APPLICATION

PLEASE CHECK ONE:  RUNNER  WALKER

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors and administrators, waive any and all rights and claims for damages I may have against The Scott Smith Memorial Foundation, Inc., the race sponsors, and their agents or representatives for any and all injuries suffered by me in this event. I further give my full consent and permission to The Scott Smith Memorial Foundation the irrevocable right to use any photographs, videotapes, audiotapes, or other recordings of me and/or minor children that are made during the course of this event. I hereby, by my signature, acknowledge reading and understanding this clause, and attest and verify that I have trained sufficiently for and am physically fit for this event.

EVENT WILL TAKE PLACE RAIN OR SHINE, NO REFUNDS.

NAME \_\_\_\_\_ AGE (As of event) \_\_\_\_\_  FEMALE  MALE

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

School Name (Youth Participant) \_\_\_\_\_ Current Grade \_\_\_\_\_

T-SHIRT SIZE  S  M  L  XL  2XL  3XL (Additional charge for 2XL \$1.50, 3XL \$3.00)

ADULT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ DATE \_\_\_\_\_

(If under 18 yrs. of age)

EVENT CLOSSES AFTER 200 PARTICIPANTS