



The mission of Carter Christian Academy is to provide a secure Christ-centered environment in which students will have the opportunity to acquire a personal knowledge of God, develop Christian character, and achieve academic excellence.



5K Run/Walk

**Saturday 9am
October 18, 2025**

**113 North Hord Street
Grayson, KY**

The proceeds will be going toward Carter Christian Academy, more specifically: classroom and school essentials, supplies, upcoming events, and daily operational costs.

8am On-Site Registration

**\$25 before October 6th
\$30 Oct. 6th thru Oct. 16th
\$35 Day of Race**

**REFRESHMENTS!
DOOR PRIZES!
RACE SHIRTS
GUARANTEED TO ALL
REGISTRANTS!**

**Course: KCU course.
All paved. Loop.
Light hills.
Great for all ages!**

**Trophies to first three overall
male and female finishers.
Awards to first three finishers in
each male and female age group.**

No duplication of awards

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+**



**RACE PLANNERS
Race Director: Alan Osuch
OsuchRacePlanner@aol.com**

**Please mail registration
and check payable to:
O Such Race Planners
Memo: Run Like A Warrior 5K**

to:

**Run Like A Warrior 5K
c/o Alan Osuch
5024 Williams Avenue
Ashland, KY 41101**

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

Run Like A Warrior 5K

Name: _____ Gender: M F Age on race day: _____

Address: _____ Email: _____

Phone: _____

Shirt Size _____ (2X, 3X and 4X add \$2.00) Amount paid \$ _____

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 Grayson, Carter Christian Academy, O Such Tri-State Race Planners, 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): _____