



East Coast Camp is where students grow in faith, build lasting friendships, and create memories that shape their lives. We're raising funds so that cost never prevents a student from experiencing these life-changing moments.



5K Run/Walk

Sunday
April 26, 2026
2pm

Community Park
Barboursville, WV

<p>1pm On-Site Registration \$25 before April 13th \$30 Apr. 13th Thru Apr. 24th \$35 Day of Race</p> <p>Trophies to first three overall male and female finishers. Awards to first three finishers in each male and female age group. <i>No duplication of awards</i></p> <p>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 Shirts guaranteed to all registered Door prizes <i>Refreshments after the race!</i></p>	<p>Course: Start at the lake > out to the soccer field road > over the bridge > .5 mile to the right > turn around > return to the lake to finish.</p>
	 <p>RACE PLANNERS Race Director: Alan Osuch OsuchRacePlanner@aol.com or 606-369-4403</p>	<p>Please mail registration and <u>check payable to:</u> O Such Race Planners Memo: All About That Pace to:</p> <p>All About That Pace 5K c/o Alan Osuch 5024 Williams Avenue Ashland, KY 41101</p>

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All About That Pace 5K

Name: _____

Gender: M F

Age on race day: _____

Address: _____

Email: _____

Phone: _____

Shirt Size (2X, 3X and 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 Village of Barboursville, New Life Church, 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): _____