

28th annual

Laurel Memorial Run & Walk

Saturday, July 20, 2024

19 Park Place, Silver Creek, NY, 14136 — Parking available across the street at Rite Aid



Celebrating people with Down syndrome & other developmental disabilities!

5K RUN/WALK - Enjoy cheers from spectators



8K RUN - The toughest race you'll love to run



LAUREL'S LAP - For anyone with a disability



FUN RUNS - For children age 7 and younger



About the Laurel Memorial Run/Walk

Wayne and Elaine Hotelling created Laurel Run in 1997 in honor of their oldest daughter, who had Down syndrome. The event is a celebration of the achievements of people with disabilities, as well as a reminder that those with disabilities can accomplish great things, if given the chance. Laurel herself enjoyed a full, active life until her death in 2017 at the age of 54. Help continue Laurel's legacy by taking part in the event that bears her name. Proceeds from Laurel Run support people with disabilities through ...



SCHEDULE

- 7:00 ... Check-in & Registration begin
- 8:10 ... Opening ceremonies
- 8:30 ... 5K Run, 5K Walk and 1K Walk begin
- 9:00 ... 8K Run begins (4 water stations on course)
- 10:00 ... Children's Fun Runs (age 7 and younger)
- 10:15 ... Laurel's Legacy Lap (for people with disabilities)
- 10:30 ... Awards Ceremony
 - Cash prizes (\$100, \$75, \$50) to top 3 male and top 3 female finishers in the 8K Run
 - Medals awarded to top 3 male and female finishers in each age group in 8K & 5K
 - Awards to top 3 teams in both 8K and 5K (combined times of team's first 4 finishers)
 - Shirt and commemorative medal for all 8K, 5K, and 1K participants!

NOTE: 8K Run is part of the Chautauqua Striders Runner of the Year Series, sponsored by KeyBank.

The cost for the 8K Run, 5K Run/Walk and 1K Fun Walk is \$25 (\$20 age 17 and under). Entry fees go up \$5 on July 19. Register by June 28 to receive your shirt at the event. Register online at www.laurel-run.com. For questions, phone 716-661-4735 or email steve.watson@resourcecenter.org; or Wayne & Elaine Hotelling at 716-934-3952.

Can't join us for the actual event? Then do a Virtual Run or Walk! Register at www.laurel-run.com.

2024 Laurel Memorial Run/Walk Entry Form

(OR register online at www.laurel-run.com)

Name: _____

Address: _____

Phone: _____ E-mail _____

Date of Birth: ____/____/____ Age on 7/20/24: _____ Gender: M F

Shirt Size (circle one) Youth: S M L Adult: S M L XL 2X 3X 4X

Event: 8K Run 5K Run 5K Walk 1K Fun Walk

Team Name: _____

REGISTRATION OPTIONS

To do the 8K, 5K or 1K: \$25 (18 and older) \$20 (17 and younger)

To do both the 8K and 5K: \$35 (18 and older) \$30 (17 and younger)

*** Fees increase \$5 July 19!**

You can register for FREE by raising at least \$50! Use the form below or visit www.laurel-run.com to find a link to create a fund-raising web page.)

I am unable to participate this year. Please accept my donation of \$ ____.

ADDITIONAL OPTIONS

\$15 - Shirt size XL or smaller
Size(s): _____ Quantity: _____

\$20 - Shirt size 2XL or larger
Size(s): _____ Quantity: _____

Fun Runs (children 7 & under)

\$5 - 1 child

\$10 - 2 or more children

Name(s) _____

\$10 - TRC Membership

Continue Laurel's legacy by becoming a Member of The Resource Center!

Your Membership makes us stronger when we advocate on behalf of people with disabilities. You'll get a TRC card offering discounts at 30+ businesses!

FREE - Associate Membership

Choose this option to show support for people with disabilities without paying the \$10 Membership Dues.

TOTAL CHECK AMOUNT: \$ _____

Make check payable to "Laurel Run/Walk" and mail to: Filling the Gap, Inc., 92 Fairmount Ave., Jamestown, NY, 14701.

Injury Waiver

I know that participating in athletic events is potentially dangerous. I should not take part in any Laurel Memorial Run/Walk activities unless I am medically able and properly trained. I agree to abide by any decision of an official relative to my ability to safely participate in the event. I assume all risks associated with participating in this event, including but not limited to contact with other participants or passersby, falls, weather conditions including humidity and temperature, traffic and the actions of motorists and adjoining landowners whether unintentional or intentional, and conditions of the road, 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 Filling the Gap, Inc., The Resource Center, Western New York Finish Line Services, Chautauqua Striders, KeyBank, the Chautauqua Region Community Foundation, RunSignup.com, and event organizers, sponsors, and volunteers and their employees, agents and successors from all claims or liabilities of any kind arising out of my participation in this event. I further grant permission to any or all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature _____

Signature of parent or guardian if participant is under 18 _____

Laurel Run/Walk Pledge Form Raise \$50 or more and receive a free shirt and commemorative medal.

Collect all contributions in advance. Bring this form with you the day of the event or mail in advance to: Filling the Gap, Inc., 92 Fairmount Avenue, Jamestown, NY, 14701. DO NOT MAIL CASH. Have donors make checks payable to **Laurel Run**.

Participant's Name: _____

Phone Number: _____

Thanks for supporting people with disabilities by collecting pledges! You can also raise money by creating an online fund-raising page that you can link to your social media accounts. Visit www.runsignup.com/Race/NY/SilverCreek/LaurelMemorialRunWalk.

Sponsor's Name*	Address or E-mail Address	Phone	Amount

* Those donating money to the Laurel Memorial Run/Walk may be added to our mailing lists. **NOTE: People who donate \$10 or more can become a Member of The Resource Center (and receive TRC's Membership Discount Card) by placing their initials next to their name.**