

CLASSIC



Classic Lexus Welcomes You and Your Family to this Great Event!

Classic Lexus, Willoughby Hills Family Health Center & the City of Willoughby Hills present the 7th Annual

Classic Willoughby Hills 5K Run/Walk

Sunday, October 3rd, 2021 • A special event for the whole family

PLACE

The run and walk will depart from:
Classic Lexus
2551 SOM Center Road
Willoughby Hills, Ohio 44094

Family activities!

PARKING

Willoughby Hills Family Health Center
2570 SOM Center Road
Willoughby Hills, Ohio 44094

Walk across the street to Classic Lexus

TIME

8am - Registration and check-in
9am - Run begins, followed by walk

TIME

5K run or walk
1 mile walk

FEES

5K Run/Walk: \$20 registration for each individual participating

1 Mile Walk:

\$20 registration for each individual participating, no charge for any pets!

Register:

In person at Classic Lexus or online at:
www.greaterclevelandXC.com/classic7th
or www.classiclexus.com

Prize Contest for best dog costumes!

**Proceeds to benefit:
Harvest for Hunger/St. Noel's
Food Pantry & Velosano**

**Everyone who brings a canned good
on race day will receive a FREE GIFT
and help the fight against hunger!**

AWARDS

Awards provided to top overall female and male runners. Runners in the top three in each of the following age groups (male and female): 15 and under**, 16-22, 23-30, 31-39, 40-49, 50-59, 60+
**(children must have adult supervision at all times)

T-Shirts guaranteed for the first 200 registrants. Refreshments will be available for the walkers & runners at the end of the event.



City of Willoughby Hills

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

E-mail Address _____

In consideration of your accepting this entry, I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Cleveland Clinic, Classic Lexus, Second Sole, and the City of Willoughby Hills, their representatives, successors, and assigns for any and all injuries suffered by me in said event or in transit to and from said event. I further attest that I am physically fit and have sufficiently prepared for this event. I will additionally permit the use of my name and/or pictures in the Cleveland Clinic's publications.

Signature _____

M F Age _____

5K Run 1-Mile Walk

T-shirt size size (adult):
 S M L XL XXL

**SEND ENTRY FORM &
MAKE CHECKS PAYABLE TO: CLASSIC LEXUS**

SECOND SOLE
8791 Mentor Avenue
Mentor Ohio 44060
440-290-0185

