



The Lantern at Morning Pointe is committed to helping seniors live their best life by being the provider of choice for assisted living and Alzheimer's memory care services.



5K Run/Walk

**May 30, 2026
Saturday 9am**

**Russell Senior
Center
520 Bellefonte Street
Russell, KY**

Join us for a day of pounding the pavement and turning every step into dollars for a great cause. Proceeds from this race will support our local Alzheimer's chapter they work tirelessly to end this heartbreaking disease.

<p>8am On-Site Registration</p> <p>\$25 before May 18th \$30 May 18th thru May 28th \$35 Day of Race</p> <p>Shirts to all registrants!</p>	<p>RUN/WALK TO HELP OTHERS SAVE THEIR MEMORIES!</p> <p>Door prizes Refreshments</p>	<p>Course: Starts and ends at the Russell Senior Center. Heads out past the Super Quik then toward the river. Along the river and back past the Senior Center. Then there is an out and back toward Worthington.</p>
<p>Trophies to first two overall male and female finishers.</p> <p>Awards to first three finishers in each male and female age group.</p> <p><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 PLANNERS Race Director: Alan Osuch <u>OsuchRacePlanner@aol.com</u> or 606-369-4403</p>	<p>Please mail registration and <u>check payable to:</u> <u>O Such Race Planners</u> Memo: Miles For Memories to: Miles For Memories 5K c/o Alan Osuch 5024 Williams Avenue Ashland, KY 41101</p>

Miles For Memories 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 Russell, The Lantern At Morning Pointe, O Such Tri-State Race Planners, TriStateRacer.com timing, 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): _____