

# 2023 Bob Smullens Run & Walk Entry Form

5K

10K

#

Staff Use Only

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Circle One: Male or Female

Age: \_\_\_\_\_

---

Make checks payable to:

5K or 10K Registration: \$20.

The Clark Sports Center  
P.O. Box 850  
Cooperstown, NY 13326

---

For more information, please contact Doug McCoy, Special Events Director, at (607) 547-2800, ext. 111, or email [mccoyd@clarksportscenter.com](mailto:mccoyd@clarksportscenter.com)

**ClarkSportsCenter**  
