



# FRIENDSHIP

## PEDIATRIC SERVICES

### 2<sup>nd</sup> Annual 5K Walk/Run

Race day –September 15<sup>th</sup> Check-In @ 7:00 AM – Race begins@ 8:00 AM

Name:		First:	
Last:			
DOB:	Sex: M F	Age on: 09/15/12	
Address:			
City, State, Zip:			
E-Mail Address:		Phone number:	
Shirt Size:	S M L XL	2XL	
Choose the following event:	Run	Walk	
Choose the category:	Individual	Parent/Child	
<p>Release:</p> <p>I know that running and volunteering to work in races are potentially hazardous activities. I should not enter and run in this race unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work races including, but not limited to falls, contact with other participants, and effects of the weather, including high heat and or humidity, the conditions of the road and traffic on the course, 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 Friendship Community Care, Inc, and all sponsors, their representatives and successors for all claims or liabilities of any kind arising out of my participation in the race and or other activities even though liability may arise out of negligence or carelessness on the part of the persons name in this waiver. I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. All race fees are non-refundable.</p>			
<p>To be guaranteed a t-shirt, you must pre-register by Aug. 31st. All early entries received will be placed in a drawing for a \$25.00 Wal-Mart gift card.</p>			
Signature:		Date:	
Parent Signature (If under 18 years):		Date:	
<p>Make checks payable to: Friendship Community Care          Mail to: Friendship Community Care          P.O. Box 1127          Marshall, AR 72650</p>			
<p>Entry Fee : Individual \$20-Late registration: \$25 * Parent/Child \$30.00-Late registration: \$35          For more information contact: Lynda or Keri (870) 448-5976</p>			