

ST. JUDE Pace by Pace – We Run 4 a Cure

5K and 1-MILE FUN RUN
SATURDAY, September 30, 2017 at 8:30 AM

All proceeds go to support ST. Jude Research Hospital.

SEPTEMBER IS CHILDHOOD CANCER AWARENESS MONTH!!

- Event Fees:** Registration: \$20 (includes T-shirt)
Race-day registration: \$25 (no guarantee on T-shirt)
- Online registration:** <https://stjudepacebypace2017.eventbrite.com> until 4 AM 9/29/2017
- Location:** George County Middle School, Lucedale, MS
- Time:** Check-in/race-day registration 7:30, Event starts: 8:30 AM
- Course:** Flat, fast, out and back – perfect for a Personal Record (PR)
- Awards:** Overall Male/Female and 1st, 2nd, & 3rd, Male and Female runners for the following age divisions: 12 & under, 13-19, 20-29, 30-39, 40-49, 50-59, and 60+ (age divisions for 5K run only)
- Details:** Event will take place rain or shine.

REGISTRATION FORM

FIRST NAME _____ LAST NAME _____ SEX: F M AGE: _____

ADDRESS _____ CITY _____ STATE: _____ ZIP _____

EMAIL _____ PHONE _____

1 MILER ____ 5K _____ T-SHIRT SIZE: S ____ M ____ L ____ XL ____ XXL _____

OPTIONAL DONATION TO ST JUDE \$ _____ TOTAL AMOUNT ENCLOSED \$ _____

Waiver: I hereby affirm that I am in proper physical condition to participate in the St Jude Team Carlie 5K Run/Walk, and in consideration of the acceptance of this entry, agree to assume all risk of injury to myself and all risk of damage or loss of property arising out of my participation in this event; to release and forever discharge all sponsors and promoters which may arise from my participation in this event. I understand that my entry is non-refundable and non-transferable. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running or walking in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or blades, animals, and radio headsets are not allowed in the race and I will abide by these guidelines. 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 LRH Productions, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature _____ Date _____
(Signature of Parent or Guardian if under 18)

Please make checks payable to: St Jude.
Send to: 2113 Basin Refuge Road, Lucedale, MS 39452