

# Going the Distance to Fight Lymphedema Medal of Honor Park Saturday ~ April 2nd ~ 8 AM

**Benefits:** Proceeds will be donated to the National Lymphedema Network (lymphnet.org)

**Location:** Cottage Hill Park Pavilion

**Distance:** 5K Run/Walk and Fun Run using the parks trails and sidewalks.

**Registration:** Register by mail (entries should be postmarked by March 28th), in person at Hillcrest Fit body Boot camp, CARES Health Services, McCoy Outdoor, Run-N-Tri, or Fleet Feet in Mobile or Running Wild in Fairhope until noon on March 31, or online until 4 AM Friday, April 1 - <https://www.eventbrite.com/e/lymphedema-run-tickets-19050138477>

**Entry fees:** Pre-registered - **\$20** – without shirt    **\$25** – with shirt  
No race day registration will be accepted.

**Awards:** Top male and female Overall and top male and female in 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, and 75-99.

**Shirts:** To guarantee a shirt on race day, your application must be received by March 30.

**Post-Race Party:** Light refreshments will be provided after the race.

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ City, State & ZIP \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

T-Shirt Size: YS    YM    YL    YXL    S    M    L    XL    XXL    No Shirt

I know that running a road race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature I certify that I am medically able to perform this event, am in good health and am properly trained. 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 Cares Health Services, City of Mobile, 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 of Participant \_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian must sign for participants under 19)

Make checks payable to: **Cares Health Services.**

Mail completed applications and fees to: **878 Hillcrest Rd, Suite A; Mobile, AL 36695**