



# Save-A-Sole

2 Mile Run/Walk

Sunday August 6, 2017 7:30 AM

**CONDUCTED BY:** Complete Sports Productions For more info call 639-0303.

**DATE & TIME:** Sunday, August 6, 2017 at 7:30 AM

**RACE LOCATION:** Providence Hospital, Mobile, AL (east side) Building B

**DISTANCE:** Mostly flat course; double loop for the 2 Mile Run/Walk

**SPLITS:** Splits called at mile mark.

**AWARDS:** 2 MILE RUN: Awards to top ten men and women overall. We'll also have random drawings for other prizes.

**REGISTRATION:** Pre-register by mail (postmark by July 30), walk-in at McCoy Outdoor, Run-N-Tri, or Fleet Feet in Mobile or Running Wild in Fairhope by noon August 3, or online at <http://saveasole2017.eventbrite.com> by 4 AM August 5.

**ENTRY FEE:** Pre-registered: \$8.00 Day of race - \$10.00.  
Register Day of race from 6:30 to 7:15 AM at Providence Hospital.

**DONATIONS:** Please bring gently used shoes, unused race shirts, and canned goods to donate to the Waterfront Mission

**SPONSORED BY:** Providence Hospital, Vitalyte, Sacro Wedgy®, and The Trophy Shop



## ENTRY FORM FOR Save-A-Sole 2 MILE RUN/WALK 2017

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Sex:** M F

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

WAIVER, RELEASE & COVENANT NOT TO SUE (read carefully and sign)

In Consideration of Complete Sports Productions, LRH Productions, Providence Hospital, their sponsors, agents, servants, representatives, licensees, contractors, successors & agents organizing & conducting the above said race & allowing me to participate & run in said run. I hereby waive & discharge forever said Complete Sports Productions & LRH Productions, it's sponsors, agents, servants, representatives, licensees, contractors successors & assignees from any & all known or unknown, foreseen or unforeseen, bodily & personal injury, damage to property & the consequences thereof resulting from my running &/or participating in said race & covenant not to sue for any said injuries &/or damage. I attest & verify that I am physically fit & have sufficiently trained for the completion of this event & a licensed medical doctor has verified my physical condition. Further, I hereby grant full permission to any & all of the foregoing to use any photographs, videotapes, motion picture recordings, or any other record of this event for any purpose whatever.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Signature of Parent or Guardian if participant is under 19)

**Make checks payable to:** Complete Sports Productions

**Mail to:** Save-A-Sole; LRH Productions; PO Box 6976; Mobile, AL 36660

