

# Thanks For Giving

2 Mile Run/Walk

Sunday November 24, 2019 7:30 AM



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

**DATE & TIME:** Sunday, November 24, 2019 at 7:30 AM

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

**DISTANCE:** Fairly 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 drawing for other prizes.

**REGISTRATION:** Pre-register by mail (postmark by November 14, walk-in at McCoy Outdoor, Run-N-Tri, or Fleet Feet in Mobile or Running Wild in Fairhope by noon November 21 or online <http://thanksforgiving2019eventbrite.com> by 4 AM November 23. Register Day of race from 6:30 to 7:20 AM at Providence Hospital.

**ENTRY FEE:** Pre-registered: \$8.00 Day of race - \$10.00.

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

**SPONSORED BY:** KIKER CORPORATION ([www.kikercorp.com](http://www.kikercorp.com)),  
PROVIDENCE HOSPITAL ([www.providencehospital.org](http://www.providencehospital.org)),  
SACRO WEDGY@ ([www.sacrowedgy.com](http://www.sacrowedgy.com)),  
HYDRALYTE(VITALYTE) ([www.hydralyte.com](http://www.hydralyte.com))  
The Trophy Shop

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## ENTRY FORM FOR Thanks for Giving 2 MILE RUN/WALK 2018

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 applications to:** Thanks for Giving; LRH Productions: PO Box 6976; Mobile, AL 36660