

Annual



# St. Mary's Sacred Heart Wellness Walk

## 5K and Fun Run

Saturday, April 21, 2018



St. Mary's Sacred Heart  
Hospital  
Lavonia, Georgia 8:00 am

### ENTRY FEE

**5K:** \$22 per person thru April 1st  
\$25 after April 2nd and \$30 day of race  
\$79.00 Family Discount (families of 4 )  
(All registrations before April 15th guaranteed a T-shirt.  
After April 15th by availability only)

**Fun Run \$15**

### SCHEDULE OF EVENTS

7:00 AM Race Day Registration & Packet Pick Up  
8:00 AM 5K Starts  
9:00 PM Fun Run starts

### AWARDS

Trophies given to top overall male & female finishers as well as male and female master winners. Also medals for the top 3 finishers in the following age groups for male and female: 10& under, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65+ Also medal for fun run participants.

### PURPOSE

All proceeds from this event benefit  
The Power of Hope organization which provides  
Support to cancer patients and their families.

### THREE WAYS TO REGISTER

\* ONLINE [www.wellness5k.com](http://www.wellness5k.com)

\* Mail form to:

#### **Wellness 5K**

1886 Woodpoint Court  
Lawrenceville, Georgia 30043

Checks payable to "Fundracers"

\* In person on Race Day

### FOR MORE INFO

Contact us at [fundracers5k@gmail.com](mailto:fundracers5k@gmail.com)  
For the latest updates check the website

[www.wellness5k.com](http://www.wellness5k.com)

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### St. Mary's Sacred Heart Wellness Walk and 5K - ENTRY FORM

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Gender: Male Female  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Age (on 4/21): \_\_\_\_\_ Email \_\_\_\_\_

Circle One: 5K Fun Run

T-shirt Size (Circle One): YS YM YL S M L XL XXL (add \$2)

WAIVER: I understand that road racing is a strenuous sport and a potentially hazardous activity, and I state that I am in proper physical condition for this event. I also accept any and all other risks associated with running this event, including, but not limited to falls, contact with other participants, the effects of weather and condition of the roads. Knowing these facts, and in consideration of your accepting my entry, I hereby for myself, heirs, executors, administrators or anyone else who might try to claim on my behalf, covenant not to sue, and waive, release and discharge all officials, sponsors, volunteers, St. Mary's Sacred Heart Hospital, Fundracers, and the Wellness 5K from any and all claims of liability for death, personal injury or property damage of any kind or nature arising out of or in the course of my participation in this event. This release and waiver extends to all claims of every kind of nature, foreseen or unforeseen, known or unknown. Minors participation will be accepted only with a parent or guardian's signature. I give full permission for the use of my name and/or picture in any broadcast, telecast, or any other public account of this event. Race Directors reserve the right to reject entries.

Participant Signature \_\_\_\_\_