



Come and enjoy a fun family event where the young at heart and kids of all ages will have a great time getting tie-dyed and going through obstacles.

This will be one event you will not want to miss.

Where: Sugar Grove Church of God

5019 E. 500 S.-57, Churubusco, IN

Start Time: 9:00 am

\$25.00 Registration fee per participant or \$75 for family of 3 or more

Must be received by Sept 16th to guarantee a t-shirt

Participants 8 years & under are free with a signed waiver

T-shirts can be purchased for them at a reduced price of \$8 if received by Sept 16th

Additional Fun Run Day Information:

Registration Begins @ 7:45 a.m. and ends @ 8:45 a.m.

Additional t-shirts will be available on day of the event for \$10 while supplies last

5K or 3.1 mile run/walk with obstacles and color stations

Obstacles will be climbing and crawling with a chance to go around them if you feel it just isn't something you can handle.

The color is a non-toxic, non-rash-inducing, colored cornstarch. Please plan accordingly for this could stain clothes, however most times it comes right out. It will put a layer of dust on anything going through the race though. i.e.: strollers, shoes, clothes, etc.

Make checks payable to: Ray of Hope Medical Missions and mail completed form with payment to: Jenny Gaff, 207 N Liberty St, Albion, IN 46701

Email Questions to majordan28@yahoo.com

Participant Information: (Due September 16th with payment to guarantee a t-shirt)

Name _____ Phone Number () _____

Address _____ City _____ State ____ Zip Code _____

Age _____ Shirt Size (circle one): Adult: S M L XL XXL Youth: S M L XL

Emergency Contact _____ Phone Number _____

Relationship to Participant _____

****Disclaimer**** If anything happens to me before, during, or after this race, neither I, nor anyone else will make any claim of liability against the race organizers and/or sponsors of the Ray of Hope Fun Run, Ray of Hope Medical Missions, or Sugar Grove Church of God.

Race Participant _____ Signature _____ Date _____

Legal Guardian/Parent Signature if under 18 _____ Date _____

Name _____ Phone Number () _____

Address _____ City _____ State ____ Zip Code _____

Age _____ Shirt Size (circle one): Adult: S M L XL XXL Youth: S M L XL

Emergency Contact _____ Phone Number _____

Relationship to Participant _____

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Legal Guardian/Parent Signature if under 18 _____ Date _____

Name _____ Phone Number () _____

Address _____ City _____ State ____ Zip Code _____

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