

WVU Occupational Therapy 5K Run/Walk

Times: 9:00 am Registration/Check In
10:00 am Run/Walk Begins

Price: \$15.00 Reg. before March 4th without shirt
\$25.00 Reg. before February 25th with shirt
\$20.00 Reg. on Race/Walk day without shirt



Run for FUNction

Saturday, March 12, 2016 @ 10:00 am

WVU Student Recreation Center

2001 Rec Center Dr., Morgantown WV 26506

* Proceeds from the Run/Walk will be donated to a local charity organization and help occupational therapy students attend the national occupational therapy conference in Chicago, Illinois*

***Contact us for Team rates**

Awards: To be given to top 3 male and top 3 female finishers.

Participants: Everyone ages 12+ is invited to participate in the Run/Walk. Individuals with wheelchairs and strollers are welcome as well, hills are involved! No pets. Activities will be provided for children of all ages during and after the Run/Walk. Run/Walk will take place rain or shine!

For More Information Please Contact:

Thomas Lewis: tvlewis@mix.wvu.edu 304-276-6508

OT Run for FUNction 5K Run/Walk Registration Form Pre-Registration Deadline: March 4th, 2016

Name _____ Date of Birth ___/___/___ Male _____ Female _____

Address _____ City _____ State _____ Zip _____

Phone () _____ Email _____

I will RUN the 5K _____ I will WALK the 5K _____ Age on Race Day _____ Amount enclosed \$ _____

T-Shirt Size (Uni-Sex) **Adult:** SM MD LG XL XXL (add \$1.00) XXXL (add 1.50) **Youth:** SM MD LG XL

T-Shirts available for those pre-registered need to be received by **February 25th 2016.**

**Others sold on a first come/first serve basis on race day for \$12.00

**Please make checks payable to WVU Student Occupational Therapy Association (SOTA)
Mail completed registration form and payment to:**

**WVU Occupational Therapy Program
Attention: Amanda Acord-Vira
1 Medical Center Drive Health Science Center
P.O. Box 9139
Morgantown, West Virginia 26506 – 9139**

Online Registration : Service charge of \$2.50 at: <https://runsignup.com/Race/WV/Morgantown/WVUOT5K>

I hereby – for myself, my executors, and my administrators – waive any and all rights I may have against the WVU Occupational Therapy Program and West Virginia University for injury or damages suffered by me or my children, and which may arise out of or any way be connected with this event. I understand that my participation is voluntary and I recognize that there are risks and hazards inherent in my participation to myself and/or others, and I knowingly assume all responsibility and risk involved in this event.

Signature of participant _____ Date _____

Signature of Parent or Legal Guardian if under 18 _____ Date _____