## Join us for the 22<sup>nd</sup> Annual Hills & Dales General Hospital 5K/8K Run, 5K Walk & Toddler Trot!

## Saturday, July 6, 2019 Registration: 6:30am-7:30am Toddler Trot: 7:30am-7:50am 5K & 8K Run/5K Walk: 8:00am

Location: Start/Finish at Hills & Dales Medical Arts Bldg, 6190 Hospital Drive Cass City, MI 48726

**Course:** A moderately hilly course within the village of Cass City. Water stations available on 5K & 8K routes. Snacks & cold water available following the race and during awards ceremony.

Divisions: Toddler Trot (everyone gets a medal), 8-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60+

Trophies/Awards: 5K Walk, 5K Run, 8K Run overall male/female and masters male/female winners. Trophies and medals for top three places in each age/sex division. Participants must complete the full course on their own to qualify for an award. All participants receive free passes to our Cass City fitness facility. Raffle drawings for other prizes too!

**T-shirts: T-shirts given to all participants who pre-register before June 13, 2019.** After the June 13 deadline, we will still record your size but a t-shirt **will not be guaranteed**. They will be on a first come, first serve basis on the morning of the event.

**The Toddler Trot:** For kids 8 years & younger, the course is 1/2 mile long around the hospital. The race will start at 7:30 a.m. & must be completed by 7:50 a.m. Parents are welcome to run with kids. There will be crossing guards.

REGISTRATION: \$10 for Toddlor Trot \$20 for EV /9K Dup & EV Walk Dro Dogistored \$25 day of race	
\$10 for Toddler Trot \$20 for 5K/8K Run & 5K Walk Pre-Registered \$25 day of race	
<b>To register online visit www.hdghrehab.com.</b> A link will be provided to our active.com event, where you can quickly & securely register.	
You can mail your registration & payment to: Hills & Dales General Hospital Attn: Danielle Blaine, 5K/8K & Toddler Trot Race 4675 Hill Street Cass City, MI 48726	
Cut this portion and return with payment	
Name:	Male Female Age on Race Day
Address: City:	5K Walk 5K Run 8K Run
State:Zip Code:Birthday:	☐ Toddler Trot <ul> <li>□ Check is enclosed</li> <li>Please make checks payable to Hills &amp; Dales General Hospital</li> </ul>
Phone Number:	□ Cash is enclosed In consideration of participation in either the 5K/8K Run, 5K Walk, or Toddler Trot (must sign for child), I am aware that it can be a potentially hazardous activity. I, for myself, my heirs, executors, and administrators, waive all rights and claims for
E-mail Address: T-shirt Size: 2T 3T 4T 5/6T 7T	damages I may have against Hills & Dales General Hospital, and all sponsors for any and all injuries suffered by me associated with this Run/Walk, including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I also state that I am in proper physical condition to
YS YM YL S M L XL 2XL	and all foregoing to use any photographs, videotapes or any other record of this event for any legitimate purpose.
(please circle, T is for toddler & Y is for youth)	Signature Date
Office Use Only: DateReceived	Parent/Guardian if under 18 years of age Date

## Hills & Dales General Hospital 4675 Hill Street Cass City, MI 48726

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