## RUN FOR FREE CARE AUGUST 3, 2019 at 9 a.m.



Minutes from North Park on Meridian Road Register before July 1st for a race t-shirt!

REGISTER NOW! 724-625-3770 • FreeCare5K.com

St. Barnabas Free	Care 5K Entry Form	Mail to: 5850 Meridian R	load, Gibsonia, l	PA 15044	T- Shirt Select: Adult/Child & Size
First Name	Last Name	M Male Female	Birth Date	Age on 8/3/19	O O O O
					S M L XL 2XL
Mailing Address (include Apt. #)		City		Sta	ate Zip Code
Telephone	Email				
				Entry Fee	
□ Runner □ Walker □ Wh	eelchair Best Completed 5K ( Mins   Se	ecs ):	5K My Way (70+)	Fee before 8/3/19 (\$ Race Day 8/3/19 (\$3	,
□ Veteran / Active Duty / First Resp	onders   Team Name:		□ Volunteer	2X T-Shirt +\$3	
WAIVER: In consideration of your accepting this entry, I the above signed, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against St. Barnabas Health System and any other sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will participate in this event as a foot-race entrant, that I am physically fit and sufficiently trained for the completion of this event. Further, I hereby grant full permission to use my name and likeness, as well as any photographs or any record of this event in which I may appear for any legitimate purpose including advertising				5K My Way (\$17)	
				Donation to Free Ca	are Fund.
				Total Enclosed	\$
and promotion. NO PETS PERMITTED.					