

# JAYHAWK 5K RUN/WALK

Friday, October 11 | 11:00am

University Park Golf Course 2100 Marquette Avenue

The Jayhawk 5K is part of the Muskegon Community College Cross Country Day which includes a collegiate and high school invitational. **New this year:** registration includes a t-shirt and lunch in the Health and Wellness Center immediately following completion of the race!

Please park at Muskegon Community College or Olivet Evangelical Free Church (2175 Marquette Avenue) and walk to the course

10:15 am Check-in/Onsite Registration

11:00am 5K Starts

Lunch immediately following in Health and Wellness Center



## Entry Fee

**\$35 Pre-Registration Fee**

**\$40 Day of Registration**

**\$10 Run/Walk Only (shirts available for \$10 purchase)**



**T-Shirt & Lunch Included!**

## Jayhawk 5k Payment and Registration

**T-Shirt Size:** \_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ XXXL

**Please charge my registration of \$35 to:** \_\_\_\_\_ VISA \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ American Express

Account Number: \_\_\_\_\_ Ex. Date: \_\_\_\_\_ CSC: \_\_\_\_\_

My signature authorizes payment to the FMCC from my pay as outlined above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Gender: Male Female

I hereby, for myself, my heirs and my personal representatives(s), release and discharge Muskegon Community College and its agents and employees from any actions or claims for damages which I may have and for all sicknesses or illnesses which may occur as a result of undetected medical conditions and/or any and all injuries suffered by me either in training for, participation in or traveling to any activity directly associated with Muskegon Community College. I agree that certain activities may be dangerous and possible injuries may, by nature, occur. I do, however, agree to assume full responsibility.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_ Age: \_\_\_\_\_

\*PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

\*If under 18 years of age

Please send to Foundation for MCC, 221 S. Quarterline Road #1209, Muskegon MI 49442

*The Foundation for Muskegon Community College is a 501c3 nonprofit organization supporting the mission of MCC. Our federal identification number is 38-2363598. for more information visit [muskegoncc.edu/foundation](http://muskegoncc.edu/foundation) or contact Amy Swope at 231-777-0571.*