

Family Services of McDowell County, Inc. No Excuse for Abuse 5K run/walk and Fun Run

"We run so they don't have to!" Timing by Lee Timing, LLC



Entry Fees:

- \$20 Mail in or Drop Off at Family Services of McDowell County, Inc. on or before May 11, 2012.
- \$25 Day of race or after May 11, 2012 Race Day Registration 7:30am 8:30am
- \$10 Fun Run Kids 12 and under
- \$10 Phantom Runner (would like to donate to the cause but don't want to run, a shirt, or cannot make it.)
- Race Packet may be pickup at Family Services on June 7th from 8:00am 4:00pm or on the day of the race from 7:30am-8:30am
- Race shirts are guaranteed to the 1st 100 runners!
- NO PETS OR BABY JOGGERS ALLOWED ON COURSE

AWARDS:

Send to:

Medal for the 1st – 3rd Overall, Men and Women, Medals for the Top 3 Males & Females in each age group Group Awards 1st place. Groups of 4 runners can make a team to compete against other groups. Total group time will be tallied. **Groups must sign up on or before June 7, 2012.** All Kids Fun Run Participants will receive a medal.

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Age Groups for 5K:

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12 & under,	13 – 19,	20 – 29,	30 – 39,	40 – 49,	50 – 59,	60 - 69,	70+

Mail In Registration:

Online Registration:

https://runsignup.com/Race/NC/Marion/NoExcuseforAbuse5K

Family Services of McDowell County, Inc. PO Box 1572 Marion, NC 28752 Checks make payable to: Family Services of McDowell County, Inc. (FSMC) 828-652-8538 WAIVER OF LIABILITY:

Please Read & Sign! In consideration of the acceptance of the entry, I for myself, my heirs, and assigns, hereby release the sponsors, race workers, and officials of this race from any and all liability arising from illness and damages I may suffer as a result of participation in such event. I fully assume and understand the risks of voluntarily participating in this race, including death, or injury due to vehicles, falls, collisions with participants or spectators, actions by hostile humans or animals, uneven pavement, obstructions adverse weather, sudden illness or any other risk. I attest that I am physically fit and have sufficiently trained for this event and am aware that participation in any of these events could, in some circumstances, result in severe physical soreness or injury. I authorize run officials to provide medical attention at my expense should I appear in need. For injuries I sustain including death I hereby waiver, Family Services of McDowell County, Inc. and anyone connected with this event from any claim or lawsuit that may be brought at any time by me, my family, estate, or heirs arising from my voluntary participation in this event. I also give permission for free use of my name and picture in any broadcast/telecast or written account of the event. I understand that the entry fee I pay is NON-REFUNDABLE. I have read this agreement and pay the entry fee in exchange for the privilege of participating under the conditions of this agreement.

Signature (if under 18 Parent	or Guardian)	Date				
Name: Runner's First Name						
		numers Last Name				
Age on the date of race:		T-Shirt Size: Adult: Youth:				
Participating in (circle): 5K	Fun Run	Phantom Runner Group Run: Group Name:				
Address: Street		Emergency Contact Information				
City/Town	Zip Code	Name of Person to be contacted & relationship				
Home Phone (include	e area code)	Phone #'s Cell & Home				