



Respiratory Care Club presents...

**Saturday, April 18, 2020 – 9 a.m.**  
**Maury County Park – Columbia, TN**

**Registration time: 8 a.m. – Run Time: 9 a.m.**

Pre-Registration (Deadline: March 21, 2020)

5K Run/Walk: \$25 each\*

Kids 12 & Under: \$10 each\*

\*Pre-registration prices include **ONE** t-shirt per registration, any additional t-shirts are \$15.

\*XXL sizes are an additional \$5 each.

Day of Run (April 18, 2020)

5K Run/Walk: \$35 each\*\*

Kids 12 & Under: \$15\*\*

\*\*T-shirts will be available on the day of the race while supplies last for \$15 each.

\*\*XXL sizes an additional \$5 each.

For More Information, Contact:

Hope Rubert (512) 694 – 1991

Anleigh Vickery (318) 789 – 9711

Jenny Nguyen (808) 780 – 2658

or email [LungsOfSteel5KRun@gmail.com](mailto:LungsOfSteel5KRun@gmail.com)

Mail This Form and Payment To:

R. David Johnson

Respiratory Care Program Director

Columbia Campus - Walter Building, room 124

Columbia State Community College

1665 Hampshire Pike

Columbia, TN 38401

\*Make checks payable to: **CSCC Respiratory Care Club**

**Saturday, April 18, 2020 – 9 a.m.**  
**Maury County Park – Columbia, TN**

Pre-Registration Deadline: <b>March 21, 2020</b>	Registration: <b>8 – 8:45 a.m.</b>	Run Time: <b>9 a.m.</b>
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<i>Runner Name(s): (include children)</i>	<i>County:</i>
<i>Runner Email:</i>	<i>Club Sponsor: (optional)</i>

**Check & fill QTY / TOTAL AMOUNT:**

<input type="checkbox"/> 5K Run/Walk: \$25 Pre-Register (QTY: _____)	<input type="checkbox"/> 5K Run/Walk: \$35 On-site Register (QTY: _____)
<input type="checkbox"/> Kids 12 & Under: \$10 Pre-Register (QTY: _____)	<input type="checkbox"/> Kids 12 & Under: \$15 On-site Register (QTY: _____)
<b>REGISTRATION TOTAL AMOUNT: \$</b>	<b>REGISTRATION TOTAL AMOUNT: \$</b>

- 5K run/walk will be held rain or shine and NO refunds will be given for inclement weather. Not every segment of the course is on a paved surface. The child's guardian must release the child by signing this form. Thank you for participating & enjoy the race!
- The undersigned does hereby agree to hold harmless and indemnify the Maury County Parks and Recreation, Maury County TN, Columbia State Community College, the Respiratory Care Club and their employees and agents from any claim arising from the conduct of this activity on or for the park. This agreement will be binding on the undersigned's successors, assigns, or heir. The undersigned freely and voluntarily signs this agreement in consideration for being allowed to facilitate/participate in the above described activity.
- Each runner must fill out their individual forms.
- Pre-Registration includes ONE T-shirt, there will be a limited number of T-shirts available the day of the race while supplies last and will be an additional \$15 each. (\*Any XXL sizes are \$20 each)

<i>Print Runner Name(s): (include ALL runners)</i>	
<i>Runner Signature: (If under 18 y.o. guardian signature required)</i>	<i>Date</i>

**Select your T-shirt size(s) & quantity desired:**  
**if selecting XXL an additional \$5 MUST be included for each t-shirt.**

QTY	Adult	QTY	Youth	QTY	Extras
	Small		Small		Small (\$15)
	Medium		Medium		Medium (\$15)
	Large		Large		Large (\$15)
	X-Large				X-Large (\$15)
	XX-Large (Addt'l \$5)				XX-Large (\$20)

EXTRA T-SHIRTS TOTAL AMOUNT: \$ \_\_\_\_\_ Form of Payment: \_\_\_\_\_ Check \_\_\_\_\_ Cash

Make checks payable to: **CSCC Respiratory Care Club**

(Registration & T-shirts) **Grand Total Enclosed:** \$ \_\_\_\_\_

**PRE-REGISTRATION DEADLINE: SATURDAY, MARCH 21, 2020**