



Wings of Mercy Runway 5K

5k Run / Competitive Walk and 1 mile Fun Run / Walk

At Linden Price's Airport 618 W. Silver Lake Rd.

Saturday June 24, 2017

The Wings of Mercy Runway 5K Run / Competitive Walk and 1 Mile Fun Run / Walk will be a twilight race along the Runway and Taxiways of the Linden Price's Airport. This unique 5k race benefits Wings of Mercy East Michigan Inc. Wings of Mercy provides free air transportation in General Aviation Aircraft for patients with limited incomes needing treatment at medical centers within 600 miles of Eastern Michigan.

Register online at www.runsignup.com/wingsofmercy5k

Schedule:

Friday June 23, 2017: 4:00pm to 7:00pm— Onsite registration and race packet pick-up at the Linden Price's Airport

Saturday June 24, 2017: 12:00pm to 7:00pm — Onsite registration and race packet pick-up at the Linden Price's Airport

8:00pm to 8:45pm — 1 mile fun run / walk

9:00pm to Finish — 5K race with awards to follow

Entry Fees

1 Mile Fun Run / Walk—Donation (T-shirt and race packet not included)

5K Race (Run/Walk) - \$25 if registered by May, 24, 2017 (Family rate of \$60 total for parents and up to 4 children 18 and under)

- \$30 if registered by June 10, 2017 (Family rate of \$65 total for parents and up to 4 children 18 and under)

- \$35 if registered after June, 10, 2017 (Family rate of \$70 total for parents and up to 4 children 18 and under)

SCAN ME!



Mail in Registration

Name: _____

Address: _____

City/State/Zip _____

E-Mail: _____

Phone: _____

Age: _____ Sex: _____

1 Mile Fun Run / Walk ___ 5K ___ 5K Comp. Walk ___

T-Shirt Size (5K only) (Adult) Small ___ Medium ___ Large ___ XL ___

(Youth) Small ___ Medium ___ Large ___ *T-shirts can only be guaranteed if received by June 10, 2017 *

Waiver

I, the participant, intending to be legally bound and hereby waive or release any and all right and claims for damages or injuries that I may have against Wings of Mercy East Michigan Inc., and all of their agents assisting with the event, sponsors and their representatives and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that I am medically able. I further agree that Wings of Mercy East Michigan Inc. may use for publicity and/or promotional purposes, without any obligation or liability to me, any picture of my participation in either of these races. I understand that all entry fees are non-refundable. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above waiver.

Signature _____

Date _____

Make Checks payable to : "Wings of Mercy East Michigan Inc." Amount Enclosed : _____ (For Family rate please complete a registration form for each Mail completed registration form and check to: family member and mail together with payment)

Wings of Mercy East Michigan , P.O. Box 622, Bay City, MI, 49707