

3rd Annual Sonda Ellis Moore Memorial Scholarship 5K Run/Walk

Proceeds to Benefit Sonda Ellis Moore Memorial Healthcare Scholarship

When:

Friday October 17, 2014 at 5:30 p.m.

Where:

Wayne Medical Center, Hwy 34 and Canyon Road, Piedmont, MO

Course:

The course is a scenic 5K run/1 mile walk, including rolling hills, up Canyon Road. The course will be marked with orange cones allowing for participant safety. The event will start and end at the Wayne Medical Center parking lot.

Registration and Fees (non-refundable):

Pre- registration: Before October 1, 2014 - \$20
Registration: October 2, 2014 through race day - \$25
Race Day Registration Times: 4:45 p.m. - 5:15 p.m.

Awards:

Trophies will be awarded to the top overall male and female runners; medals will be awarded to the top three individuals in each age division. T-shirts will be given to all pre-registered participants on race day. *Those registering after October 1, 2014 are not guaranteed a T-shirt.*

Age Categories:

Male and female: 12 and under, 13-19, 20-29, 30-39, 40-49, 50-59, 60 and over.

Sonda Ellis Moore Memorial 5K Entry Form:

Please return form and payment to Wayne Medical Center, RR 4 Box 4515, Piedmont, MO 63957
ATTN: Rhonda

Make checks payable to: Sonda Ellis Moore Memorial Scholarship Fund

Name _____ Age on Race Day _____ Gender _____

Address _____ City/State/Zip _____

Phone _____ Email: _____

T-shirt: Youth: S M L Adult: S M L XL XXL

I am participating in the: (check one) 5k 1 Mile Walk

I understand that off road running and road racing can be a hazardous sport or recreational event. In consideration of the foregoing I, for myself, my heirs, my executors, administrators, and assigns do hereby release and discharge the Sonda Ellis Moore Scholarship Committee, Wayne Medical Center, Medical Center Pharmacy, the City of Piedmont, all co-sponsors, the race director, and any of the race workers from all claims of damage demands, actions and causes of actions whatsoever, in any matter arising or growing out of this event. I verify that I am physically fit and trained to enter this event.

Signature (Parent/Guardian Signature if under 18)

Date