

WHEN

November 2nd,
2019 8 AM

WHERE

North Jefferson City Pavilion
JEFFERSON CITY, MO

WHY

RUN or WALK as we raise funds to support mental health services for children, families and adults in our community who are in need!

CONTACT

Kristen Blevins

kblevins@compasshn.org

573.234.2015

www.compasshealthnetwork.org

PRIZES

Top 3 runners in each age division and the top male/female in the 5K will receive awards. 7-12, 13-18, 19-29, 30-39, 40-49, 50+



**NEW DATE!
NOV 2nd!**

5K RUN OR 1 MILE WALK!

- **All participants receive a shirt!**
- **Chip Timing!**



Compass Health
Network

**Bounce House
For the Kids!**

SCHEDULE OF EVENTS

November 1st

11:30am-1:30pm: Registration & Early Packet Pick Up
at CHN Office (227 Metro Drive, Jefferson City, MO)

November 2nd

6:30 am: Race Day Registration & Packet Pick Up
7:30 am: Registration closes
8:00 am: Race begins

ENTRY FEES:

1 Mile Walk: \$20 5K Run: \$25

Participants 18 and under: \$10 walk or run!

All participants receive a shirt!

TO REGISTER ONLINE VISIT

www.compasshealthnetwork.org

For more information contact Kristen Blevins

(kblevins@compasshn.org or 573.234.2015)



Please make checks payable to:
Compass Health Network

Mail to:

Attn: Kristen Blevins

2625 Fairway Drive, Suite E

Fulton, MO 65251

****Registration is non-refundable.***

Name: _____ Age on Race Day _____

Address: _____

City _____ State _____ Zip _____

Email: _____ Phone: _____

I am registering for: 1 mile walk ___ 5K run ___

To pay via credit or debit card please call 1.636.332.2184

Checks can be made out to Compass Health Network

Signature: _____

Shirt Size (Circle) Child: XS S M L Adult: S M L XL XXL 3XL

Please sign & return the waiver statement below:

In consideration of this entry being accepted, I hereby for myself, heirs, executors and administrators waive and release any claims that I may have against Compass Health Network or any of the sponsors of Happy Feet for Healthy Minds. I certify that I am physically able to participate in this event. I grant permission for any and all of the forgoing to use any photographs, videotapes or recordings or any other record of this event for any purpose whatsoever.

Signature: _____

Date: _____

(Parent's signature required if participant is a minor)