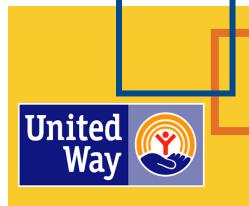


APPY FEET FOR HEALTHY MINES

SK RUN/I MILE WALK JEFFFERSON CITY, MISSOURI October 2, 2021



# **Chip Timing**!

Participants receive a shirt!

## Kristen Blevins 573.234.2015 kblevins@compasshn.org www.compasshealthnetwork.org

## **WHAT**

Run or walk as we raise funds to support suicide awareness in our community.

WHERE North Jefferson City Pavilion

JEFFERSON CITY, MO

# 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+

Grand Prize Drawings Top 10 Walkers Entered Top 10 Runners Entered Winner drawn from each category

## SCHEDULE OF EVENTS

#### Oct 1, 2021

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

### Oct 2, 2021

6:30 am: Race Day Registration & Packet Pick Up7:30 am: Registration Closes8:00 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

Name:	Age on Race Day
Address:	
CityZip	
Email:	Phone:
I am registering for: 1 mile walk 5K run	
To pay via credit or debit card please call 1.636.33	2.2184
Checks can be made out to Compass Health Netw	ork
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 OR Run For Their Lives. 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)