



**First Annual  
"Freedom 5K"  
Downtown Laurel  
May 21, 2011 8:00AM**

**Z.A.C. PROJECT**  
*Zeal And Compassion for women  
Christian Recovery Center*

**LOCATION:** 5K Run/Walk will be held in Historic Downtown Laurel beginning at City Hall @ 8:00 AM. Day of race registration begins at 7:00 AM. **No bicycles, skateboards, skates, or rollerblades are allowed in run/walk.**

**PRE-REGISTRATION:** by mail must be post marked by May 16th or drop off registration forms @ Christ's Church 1301 N. 2nd Ave. Laurel, MS 39440 Mon. Tues. or Thurs. between 9 am & 4pm.

**REGISTRATION FEES:** (non-refundable)

5k-\$25 or adopt a block for \$100 (includes a sign along 5k route)

Make Checks payable to Dying to Live Ministries

**T-shirts are guaranteed for all pre-registered runners and walkers.**

Remaining shirts will be given out on a first come first serve basis.

Mail Checks & pre-registration to:  
Christ's Church 1301 N. 2nd Ave  
Laurel, MS 39440  
Any questions call  
601.649.8040 (Christ's Church office)

**For more info call Missy Clark 601.323.3375**

**First Annual "Freedom 5k" Registration form**

Name: (please print clearly)

\_\_\_\_\_

Age: \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Check one  Male  Female

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( \_\_\_\_\_ )- \_\_\_\_\_ - \_\_\_\_\_ T-shirt size Adult—S M L XL Youth- S M L XL

**PARTICIPANT MUST COMPLETE THE WAIVER AND RELEASE STATEMENT:**

In consideration of the acceptance of this entry and my registration as a participant in the Dying to Live Freedom 5K Run/Walk, I do hereby waive any and all rights and claims which I, for myself and my heirs, executors, administrators and personal representatives may now or hereinafter have against and do hereby release Dying to Live Ministries of Laurel, Ms, its members, all officials, volunteers, Christ's Church of Laurel and other sponsors of the Freedom 5k Run/Walk for any and all injuries, illness, losses or death suffered by me resulting either directly or indirectly from my participation in the Freedom 5k Run/Walk. I fully understand that my participation in this event is completely a voluntary undertaking and that I assume all risk associated with my participation, including, but not limited to, falls, contact with other participants, effects of the weather, traffic, and the conditions of the course. I hereby certify that I am adequately fit and in the proper physical condition to participate in this event and that I am not participating in this event against the advice of a physician nor am I taking medications which would impair my health or ability to participate in this event. I hereby authorize the use of my name and any photographs, videotapes and other record of my participation in this event for any legitimate purpose by Dying to Live Ministries Freedom 5k .

I acknowledge that I have read and fully understand the above and assume complete responsibility for all risks associated with participation in the Dying to Live Freedom 5k Run/Walk.

\_\_\_\_\_  
PARTICIPANT signature (if participant is under 18 , parent or guardian must sign) DATE