

MILES THAT MATTER

5K Run/Walk
AND

SUPER HERO

1 MILE FUN RUN!

Super Hero costumes encouraged!!!

**November 2nd,
2013 8:00 a.m.**

Registration

\$20-Pre-register now through Oct. 25,

\$25-October 26th through Race Day

\$15-GROUP RATE—school, community, church,
or clubs of 6 or more participants.

\$15-Student Discount - any student that has
not completed High School.

\$5-SUPER HERO 1 Mile Fun Run (0-12yr)
Parents do not have to pay to participate with your
child. Free for 5K participants.



Time & Location:

The 5K Run/Walk will begin at 8AM with registration beginning at 7:15AM on race morning. Course begins and ends at The Petal Family YMCA, 547 Hillcrest Loop, Petal, Ms. This course goes through city and residential areas and is slightly hilly in some areas.

Awards

T-shirts are guaranteed on race day to pre-registered 5K entrants.

Awards will be presented to

Overall Runner and Walker

Male and Female

**Top 2 Male and Female Runners in each
age category.**

All Super Hero participants (0-12) will receive a special reward!

Race Categories

- | | |
|---------------|---------------|
| 0) Ages 0-12 | 1) Ages 13-19 |
| 2) Ages 20-29 | 3) Ages 30-39 |
| 4) Ages 40-49 | 5) Ages 50-59 |
| 6) Ages 60+ | |

The **Super Hero Fun Run** will begin at 9AM. Enjoy our large inflatable obstacle course, music, refreshments and fun activities throughout this family event. Supervised activities will be provided for all children of 5K participants during the race! Sign your child up for child watch at registration table.

There's a SUPERHERO in each of us!

Together, we continue to strengthen our community and move everyone forward. Your donations and participation makes a meaningful, enduring impact right here in

★★★ our hometown. ★★★



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5K Run/Walk AND SUPER HERO 1 MILE FUN RUN!



Name: _____ Age on Race Day: _____ Birthday ___/___/___

Address: _____ Phone: _____

City/State/Zip: _____ Email: _____

T-SHIRT SIZE (circle one) YOUTH S M L or ADULT S M L XL XXL

Only pre-registered entrants are guaranteed a shirt on race day.

Male ___ or Female ___

Event (mark One) 5K Run _____ 5K Walk _____ Super Hero Fun Run _____

5K Race Category (mark one) 0) _____ 1) _____ 2) _____ 3) _____ 4) _____ 5) _____ 6) _____

Emergency contact name _____ Number _____

Family YMCA, a not for profit corporation, and does hereby for himself, heirs, executors and administrators, **waive release and agree to hold free from all claims for damages** The Family YMCA, its branches, respective officers, directors, Trustees, Board of Directors, members, employees, or agents. I hereby allow the YMCA to take pictures (still or video) of myself and/or my children and grant permission for these images to be used in YMCA publications, presentations, publicity or promotions. I declare myself/family to be physically sound, having medical approval to engage in YMCA activities, have read the information above agreeing for myself and as a chosen representative for my family to the policies and procedures of The Family YMCA.

Signature: _____ Date: _____

Registration forms can be dropped off at the Petal Family Y or Mailed to:

Petal Family YMCA

Att: Ann Culpepper

547 Hillcrest Loop Petal, Ms 39465

aculpepper@ymcasems.org

WWW.ymcasems.org (601) 583-9399

Make checks payable to Petal Family YMCA

Office use only: Date _____ Rec# _____ Amt: _____ Check/Cash/CC _____ Staff Initials: _____