



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

HEALTHY KIDS DAY 5K Run/Walk

& Kids 1K Fun Run

Corpening Memorial YMCA Saturday - April 13, 2013

Event begins 8:00 am at the Corpening Memorial YMCA
Check-in on Race Day Begins at 7:00 am



To Register:

Mail or Return to YMCA

Sadie Simpson
Corpening Memorial YMCA
348 Grace Corpening Drive
Marion NC 28752
828-652-9622
(Make checks payable to YMCA of WNC)

Sign up Online

<http://www.active.com/running/marion-nc/healthy-kids-day-5k-2013>

Questions?

Contact Sadie Simpson: ssimpson@ymcawnc.org

FEE

Now until 3/22/13: \$20 (guaranteed t-shirt)
3/23 until Race Day: \$25 (no t-shirt guarantee)
Kids 1K Fun Run: Free (no t-shirt)

Name _____ Age on Race Day _____ DOB _____ T-Shirt Size: _____

Check one: 5k (\$20 before 3/22) _____ 5k (\$25 3/23-Race Day) _____ Kids 1K Fun Run (Free) _____

Address _____

City _____

State _____ Zip _____ Phone _____

Email _____

Liability Release: By indicating your acceptance, you understand, agree, warrant and covenant as follows: I hereby, for myself, my household, my family, heirs, executors and administrators, waive and release any and all claims and damages I may have against the YMCA of Western North Carolina (YMCA) and their respective agents, representatives, successors, and assigns, for any and all injuries which may be suffered by me, my household, or my family in connection with participation in YMCA activities and programs. I understand that the YMCA assumes no responsibility for injuries or illnesses which, I, my household or family may sustain as a result of our physical condition, or resulting from our observation or participation in any activity or use of facilities or equipment used for YMCA activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses for myself, my household or family, which may result from participation in these activities. I also grant full permission to the YMCA to use any photographs, tape or video recordings taken of me, my household or family. I agree on behalf of myself, my household, my family with the YMCA policies and procedures and understand that my/our household membership can be revoked without refund for exhibiting inappropriate behavior or abuse toward the YMCA staff and/or facilities.

Signature _____ Date _____

Signature Parent/Guardian if under age 18 _____ Date _____