



# CarePartners Spring Fling

## 5K & Fun Run for United Way



United Way of Asheville  
and Buncombe County

Date / Time: Sunday, April 13th, 2014 – 3:00pm Start  
 Location: Carrier Park, Amboy Road, Asheville, NC 28806  
 Race Day Check in: 2:00-2:45pm near the track.  
 Register: On-line @ RunSignUp.com (search for "CarePartners Spring Fling")  
 Paper Application (below) postmarked by 4/5/2014  
 Day of Race on-site 2:00 – 2:45  
 Entry Fees: 5K: Ages 15 & above \$25.00 (until 4/11/14) \$30 Day of Race  
 5K: Ages 7-14 \$10.00 (until 4/11/14) \$15 Day of Race  
 Fun Run (1 mile): All Ages \$10.00 (until 4/11/14) \$10 Day of Race  
 \$5 discount for all Couch to 5K participants (call 828-274-9567 x4280 for details)  
 Proceeds Go To: United Way of Asheville and Buncombe Co.

*This event will be held rain or shine. The entry fee is non-refundable. Each participant must complete a registration form. The fees for multiple participants may be included on one check, please mail all registration forms together for multiple participants paying together. Photocopies of this form are acceptable.  
 The race course is wheelchair and stroller friendly with the majority of the course being paved with only a small grassy and mulched section. The distance of the course is 5K = 3.1 miles. The Fun Run is approximately 1 mile.*

(cut along dotted line)

### Registration Application

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_ Gender: M F (Circle One)  
 Address: \_\_\_\_\_ Race Day Age: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Birth Date: \_\_/\_\_/\_\_  
 Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

T-Shirt: (circle one) S M L XL XXL Youth: S M L XL  
 Only the first 200 registered participants are guaranteed T-shirts. Sizes are not guaranteed.

Check one: 5K \_\_\_ Fun Run \_\_\_ Check# \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 Mail Registration Form and Check to: CarePartners Health Services, Attn: Pam Griffin  
 Payable to: CarePartners Health Services 68 Sweeten Creek Rd., Asheville, NC 28803

Please Read and Sign:  
*I choose to participate in the CarePartners Spring Fling 5K Run / Walk & Fun Run for United Way event(s) on April 13, 2014. I accept legal responsibility for myself, and anyone entitled to act on my behalf, and do hereby release and discharge Community CarePartners, Inc., United Way, all sponsors, contractors, organizers, and volunteers from any and all liability arising from any illness, injury, or damages that I may suffer as a result of my participation in the CarePartners and United Way 5K Run / Walk. I further grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or other record of this event for any legitimate purpose. I certify by my signature that I am in good physical condition and able to participate in this event.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Parent / Guardian signature if under 18)

