



7th Annual - 2010

Focus on Fitness 5k Walk/Run

Saturday, July 10, 2010

Race begins at 9 a.m. by the American Legion Hall

Registration begins at 7:30 a.m. until 8:45 a.m.

Sponsored by: Harbor Beach Community Hospital
and the Adolescent Health Center

Supported by: *B-FIT Health & Wellness*

PRE-REGISTRATION IS APPRECIATED, by Monday, July 5th

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Sex: Male Female Age: _____

Male and Female Divisions. Prizes will be awarded to the top two finishers in each division of the 5K Run.

Check the appropriate age division:

\$3 Registration Fee - participants receive a t-shirt and a prize for completing the race. There will be no top finisher prizes for these divisions.

- 10-14 years old
- 15-17 years old

(Reduced registration fee provided by the Adolescent Health Center with grants from the Michigan Department of Education and Center for Rural Health)

Check the appropriate age division:

\$10 Registration Fee - participant receives a t-shirt.

- 18-25 years old
- 26-30 years old
- 31-40 years old
- 41-50 years old
- 51-60 years old
- 61 + years old

Make Checks payable to: Harbor Beach Community Hospital
ATTN: Marketing, 210 S. First Street, Harbor Beach, MI 48441

Circle T-Shirt Size: Youth: M L
Adult: S M L XL XXL

The first 250 participants to pay and pre-register by Monday, July 5th, will receive their t-shirts on race day. Participants who pay or register after that date will receive shirts as supplies last, or at a later date.

Walker Release and Indemnification: (one participant per form please)

The Focus of Fitness 5k (3k) Walk/Run involves walking/running - an activity which may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic, and conditions of the road. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including personal injury and death, arising in any way out of my participation in the Focus on Fitness activities. It is my responsibility to dress appropriately. Although rest stops, refreshments, and other assistance may be made available during this event, I am solely responsible for my own health and safety. I represent and warrant that I am physically fit and able to participate in this event and I agree to stop and request assistance if I experience any symptoms such as, but not limited to, dizziness, excessive fatigue, shortness of breath, pain or any other conditions which would make it difficult or unsafe to continue.

I agree, for myself and heirs, executors and administrators, not to sue and to release, indemnify and hold harmless HBCH, its affiliates, officers, directors, volunteers and employees, and all sponsoring businesses and organizations and their agents and employees, from any and all liability, claims, demands, and causes of action whatsoever, arising out of my participation in this event and related activities - whether it results from the negligence of any of the above or from any other cause. This release and indemnification agreement shall be as broad and inclusive as is permitted by the State or Province in which the event is conducted. If any portion of it is held invalid, the balance shall continue in full force and effect.

I have read, understand and agree to the terms of this Agreement.

Please print name of participant _____

Signature _____

Date _____

If participant is a minor, the parent or guardian must agree to the below:

I am the legal guardian of Participant, and I hereby consent to his/her participation. I have read the foregoing release and indemnification agreement, and I hereby agree on behalf of myself and Participant to its terms.

Signature of Parent or Guardian _____

Date _____

Thank you for your participation in our Focus on Fitness 2010 - 5k Walk/Run!

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