



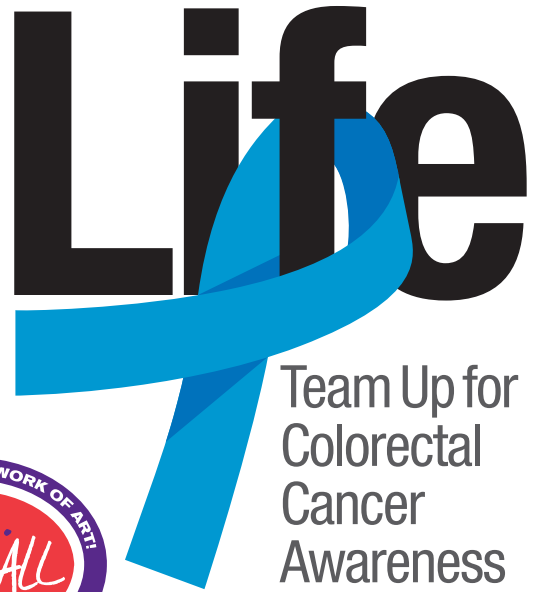
**CAMC
Foundation**

Run for Your Life

Charleston, WV • Saturday, June 16, 2018 • 8:00 am

5-Mile Run/2.5-Mile Walk

Kick off your 2018 FestivALL activities with this fun race and support a good cause. Held in conjunction with the Smoke on the Water Chili Cook-off, the five-mile race begins at Haddad Riverfront Park and takes runners through Charleston, up and around the historic Spring Hill cemetery and back to Haddad Riverfront Park. The 2.5-mile walk starts at Haddad Riverfront Park, goes through Charleston and to the base of the Farnsworth ramp, then turns around and retraces the path. Proceeds from this race benefit the CAMC Foundation to support colorectal cancer awareness and screening.



Team Up for
Colorectal
Cancer
Awareness



ENTRY FORM

Name _____
Address _____
City/State/Zip _____
Phone _____
Email _____
Date of Birth _____

Male Female

(circle one)		Age division (on day of race)	
Run	Walk	14 and under	40 to 49
(circle one)		15 to 19	50 to 59
		20 to 29	60 to 69
		30 to 39	70 and older

*Winners in each division will be recognized.

Registration is \$25 if postmarked before June 11, 2018 and \$30 thereafter. Online registration is available on give.camcfoundation.org (no charge for online processing).

This year, you can do more! Form a team online and even be a virtual fundraiser! Challenge your friends online and on the course!

Late registration and pre-race packet pick up will be held on June 15 from 3 to 7 p.m. at the CAMC Cancer Center parking lot (3415 MacCorkle Ave. SE) and on race day at the start line from 7 to 8 a.m.

Send checks and entry forms to:

CAMC Foundation
3414 Staunton Ave. SE
Charleston, WV 25304

Call **(304) 388-9860**
for more information.



Run for Your Life Run/Walk Participant Release

I am aware that road running is an inherently hazardous activity, and I am voluntarily participating in the Run for Your Life five (5) mile run ("Run") with knowledge of the danger involved and hereby agree to accept any and all risks including but not limited to personal injury, death or property damage that may occur as a result of participation in the Run.

In consideration of allowing my participation and accepting my entry, I hereby release, for myself and my executors, administrators, successors and assigns, Charleston Area Medical Center Foundation, Inc. ("CAMC Foundation"), its directors, officers, employees, agents and affiliates, as well as TSR Timing Group, from any and all present or future claims, including but not limited to claims for personal injury, death or property damage, that may arise from my participation in the Run.

Also in consideration of allowing my participation and accepting my entry, I hereby grant permission to CAMC Foundation and its affiliates to take, use, record and reproduce without restriction photographs or film taken of myself taken before, during or after the Run, including but not limited to using said images for the purposes of marketing, fundraising, advertising or any other purpose.

I have read this PARTICIPANT RELEASE form and fully understand that by signing this form I am giving up legal rights and remedies that might otherwise be available to me.

Participant signature: _____

Print Name: _____

Participant ___ IS ___ IS NOT age 18 or older.

Date: _____

T-Shirt Size S M L XL XXL

If a participant is under the age of 18 a parent or legal guardian must sign below in addition to participant.

Signature: _____

Print Name: _____

Relationship to Participant: _____

Date: _____