



# 5<sup>th</sup> Annual Walk for Hope

September 11, 2010

Southern Pines Sports Complex ♦ Dublin GA

featuring

**9/11 Commemoration @ 3 PM**

**Family Fun Day • 3 PM to 7 PM**

**1 mile Walk/Run @ 6:45 PM**

**5K Candlelight Run/Walk @ 7:45 PM**

## Candlelight Finish

**350+ candles will light up the 5K finish line.** Each candle represents a resident served by Promise of Hope.

## Male and Female Awards

1 Mile Top Overall, 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> in age groups  
(6 & Under, 7-9, 10- 12, 13-15, 16-19, 10 year age groups age 20 thru 70 & over)

5K Top Overall, Overall Master (40 and over), 1<sup>st</sup>, 2<sup>nd</sup>, & 3<sup>rd</sup> in five year age groups  
(10 & under thru 70 & over)

## A Family Fun Day

**Splash Pad Park, Water Slide, Jumpy Houses, clowns, face painting, volleyball, free hamburgers/hotdogs/water, continuous music from area bands/groups, and much more.** For more details, contact Dianne Jackson 478.998.9011 or [dwages-jackson@bassphysicaltherapy.com](mailto:dwages-jackson@bassphysicaltherapy.com).

\$10 ages 4 and up (under 4 free)

Additional \$5/each Walk T-shirt  
*Please pre-order. Use Walk/Run Entry Form to show sizes.*

\$30 cap/family of five (immediate family, under 4 free)

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

MAKE CHECKS PAYABLE TO: **Promise of Hope**

*Walk for Hope is made possible through a partnership with Promise of Hope and the Dublin-Laurens Recreation Authority*

# 5K Candlelight Run/Walk and 1 mile Walk/Run

On-line registration: <https://poh.webconnex.com/registeronline>

## ENTRY FORM

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_

AGE AS OF 9/11/10 \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

Race(s):  1 Mile  5K  Male  Female

\$15 before 9/3 with t-shirt

**Registration for 1 mile or 5K includes admission for Family Fun Day**

\$20 after 9/3 with t-shirt (if available)

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

If t-shirt is desired, check size: YS \_\_\_ YM \_\_\_ YL \_\_\_

S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ XX \_\_\_ XXX \_\_\_

## RELEASE FORM

This activity may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic & conditions of the road. By participate in this event, I hereby expressly assume all risks, including personal injury & death, arising in any way out of my participation in the Walk/Run. I am solely responsible for my own health and safety. I represent & warrant that I am physically fit and able to participate in this event and 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, my heirs, executors and administrators, to not sue and to release, indemnify, & hold harmless Promise of Hope, Inc., directors, volunteers, board members, and employees, & all sponsoring businesses & organizations and their agents and employees, from any and all liability, claims, demands, and causes of action whatsoever, arising out of participation in these events and related activities--whether it results from the negligence of any of the above or from any other cause. This release & indemnification agreement shall be as broad and inclusive as permitted by the State of Georgia. If any portion of it is invalid, the balance shall continue in full force and effect. I have read, understand & agree to the terms of this Agreement.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ (if under 18 years old at time of entry)

MAKE CHECKS PAYABLE TO: **Promise of Hope**

## MAIL ENTRY FORM TO:

Promise of Hope  
P O Box 321  
Dudley GA 31022

## FOR MORE RACE INFO:

Tommy Thompson  
(478) 676-2042  
[jethomps@progressivetel.com](mailto:jethomps@progressivetel.com)