



**Mt. Juliet Middle School  
3565 N Mt. Juliet Rd  
Mt. Juliet, TN 37122**

**Registration opens at 7:30am**

**5K Run/Walk begins at 9:00am**

**Parkinson's Fun Walk begins at 9:00am**

*To Benefit The Thigpen Family, Wilson County Teachers, & The Peterson Foundation for Parkinson's*

Register online at [www.mj4hope.org](http://www.mj4hope.org) or return this form by email to [office@eventsm3.com](mailto:office@eventsm3.com) or by mail to 1483 N Mt. Juliet Rd #175, Mt. Juliet, TN 37122. Please make checks payable to MJ 4 Hope.

Registration Fees

5K Run/Walk – \$25 if registered by Oct 1st; \$35 if registered between Oct 2nd and Oct 24th; \$40 on day of race  
Parkinson's Fun Walk – \$10 if registered by Oct 1st; \$15 if registered between Oct 2nd and Oct 24th; \$20 on day of race;  
\$10 for children 12 & under

Certified 5K Course with Champion Chip Timing

T- shirts will be available for pre-registered participants and race day registrants based upon availability. Shirt sizes are guaranteed to runners registered before October 17th.

Awards will be given in the 5K to top 3 finishers (male/female) in the Overall, Masters 1st Male and Female and the top 3 finishers in each age division beginning with 9 & under thru 80+.

*Register or Sponsor a Runner/Walker/Team by completing this form.*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age on race day: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Please select one of the following: 5k Run/Walk: \_\_\_\_\_ Parkinson's Fun Walk: \_\_\_\_\_ Kids Fun Walk: \_\_\_\_\_

Shirt Size: (Adult) S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ (Child) S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ Team Name: \_\_\_\_\_

Teacher you are Sponsoring: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ 3 digit code: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Address for CC: \_\_\_\_\_

Waiver: I know that running is a potentially hazardous activity. I should not enter and run the race unless I am medically able and properly trained. I agree to abide by any decisions of race officials relative to my ability to conclude the race. I assume all risk associated with running, including, but not limited to, falls, contact with other participants, and the effects of the running surface, all such risks being known and appreciated by me. I, by entry into this event, release for myself and anyone acting on my behalf, the MJ 4 Hope, Peterson Foundation for Parkinson's, all sponsors, organizations and any other person involved in the event, volunteer or otherwise, their directors, officers, employees, agents, and/or representatives from all claims or liabilities of any kind or nature whatsoever arising out of my voluntary participation in this event.

If I decide to use a Champion Chip for official time and I lose it or fail to return it, I agree to pay a \$30.00 replacement fee.

Signature: (Parent or guardian if minor) \_\_\_\_\_ Date: \_\_\_\_\_