2026 HALLOWEEN 5K 4 Hope

Saturday, October 31, 2026

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

Registration	7:30 AM
5K Run/Walk	9:00 AM
Parkinson's Fun Walk	9:00 AM

Registration opens at 7:30am

5K Run/Walk begins at 9:00am Parkinson's Fun Walk begins at 9:00am

To benefit MJ 4 Hope, Peterson Foundation for Parkinsons and Wilson County Teachers

Register online at www.mj4hope.org or return this form by email to 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	Early Bird through 10/7 **$25**	10/8 - 10/24 **$30**	10/25 - 10/30 **$35**	Race Day **$40**
Parkinson's Fun Walk	Through 10/7 **$10**	10/8 - 10/30 **$15**	Race Day **$20**	Children 12 & under **$10**

Certified 5K Course with A Matter of Timing

T-shirts available while supplies last. Shirt sizes guaranteed for runners registered by October 23.

5K awards: Top 3 male/female Overall, Masters male/female, and top 3 in each age division from 9 & under through 80+.

PARTICIPANT INFORMATION

First Name: _____ **Last Name:** _____ **Birth Date:** _____ **Age:** _____

Sex: Male ____ Female ____ **Event:** 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: _____

PAYMENT INFORMATION (IF PAYING BY CARD)

Credit Card Number: _____ **3-digit code:** _____ **Exp. date:** _____

Name on Card: _____ **Billing Address:** _____

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, 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 use a Champion Chip for official time and lose it or fail to return it, I agree to pay a $30 replacement fee.

Signature (parent/guardian if minor): _____ **Date:** _____

Register or sponsor a runner/walker/team by completing this form.