



Charlie Daniels Park • Mt. Juliet, TN

5K Run/Walk begins at 10:00am • Parkinson's Fun Walk 10:15am Registration Fees

5k Run/Walk – Pre-race registration \$25 by Oct 15th

\$30 Registration from Oct 16th to Oct 27; Day of Race \$35

Fun Walk – \$10 by Oct 22 / Day of Race \$15 / Children 12&Under -\$10 Halloween 4 Hope Trick or Treat - for all Children under 12 registered! Certified 5K Course with Champion Chip Timing

- TO BENEFIT: MJ 4 HOPE & The Peterson Foundation for Parkinsons MJ Support Group
- REGISTRATION - Online: mj4hope.org
- Mail Entries: MJ 4 Hope; 1483 N. Mt. Juliet Rd, #175, Mt. Juliet, TN 37122 (make checks to MJ 4 Hope) Fax entries to 615-296-9980
- T- shirts will be available for pre-registrations and race day registration based upon availability. Shirt sizes are guaranteed to runners registered before Oct. 22ND
- AWARDS: Awards will be given in 5k to top 3 finishers (male/female) in the Overall, Masters 1st Male and Female and top 3 finishers in each age division beginning with 9 & under thru 80+.

****Setup your own Team** OR**

****Sponsor a Run/Walker/Team BY REGISTERING WITH THIS FORM****

First Name: _____ Last Name: _____ Birth Date: _____

Age on race day: _____ Sex: Male ___ Female ___ 5k Run/Walk: ___ Parkinson's Fun Walk: _____

Kids Fun Walk: ___ Shirt Size: S ___ M ___ L ___ XL ___ XXL ___ Childs: S ___ M ___ L ___ XL ___ Team Name: _____

Run/Walker You are Sponsoring: _____ Amt. Sponsoring: _____

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: _____