Sign Up Today!

12th Annual GO RUN

Saturday, September 28, 2019

5K at 8:00 AM • Fun Run at 9:00 AM

EARLY PACKET PICK-UP - FRIDAY, SEPT. 27 11 AM - 6 PM
In the Mitchell Center (South Entrance) on USA Campus

Benefits: USA Health Mitchell Cancer Institute - Gynecologic Cancer Research

Organized by: USA Health Mitchell Cancer Institute & LRH Productions

Distance: Fun Run approximately 1 Mile

Location: University of South Alabama Campus – Mitchell Center Lawn/ Moulton Bell Tower

Registration: Pre-registration: By mail – Must be post marked by Monday, September 23rd

In person - McCoy Outdoor, Run-N-Tri, Fleet Feet in Mobile or Running Wild in Fairhope until noon September 25th

Online - www.usahealthsystem.com/gorun until September 25th at 11:59 PM

*Packet Pick-up and Registration - Friday, September 27th at The Mitchell Center, USA campus from 11AM – 6PM

*Race day registration and Packet Pick-up from 6:30 AM - 7:30 AM at the Mitchell Center Lawn

Entry Fees: Early Bird Special (July 1st- July 31st)

Adult (13+): \$20

Youth (12 and under): \$10

<u>Pre-Registration</u> (Aug. 1st- Sept. 27th) Adult (13+): \$25

Youth (12 and under): \$10

<u>Day of Race</u> (Sept. 28th) Adult (13+): \$30

Youth (12 and under): \$15

RUNNER IN SPIRIT \$20 (Runner in Spirit will receive a t-shirt but doesn't participate in the run)

Runner in Spirit must pick up shirt at Early Packet Pick Up or On Race Day

Teams: Teams of 6 or more. Each individual must complete a race form or register online. Awards will be given in various

categories.

Awards: 5K: Top male and female Overall, Masters, Grandmasters, Senior Grandmasters, and Race walker. Top three male and

female in age groups: 9 and under, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69,

70-74, 75-79 and 80+.

FUN RUN: Top Male and Female. Award Ribbon will be given to all Fun Run Participants.

Shirts: Gender Specific Performance Shirt or Cotton Shirt, MUST SELECT DESIRED TYPE BELOW. Women's performance

shirts tend to be form fitting. All Youth Shirt will be cotton. To be guaranteed a shirt, you must submit your registration

by Friday, September 6th.

Post-Race: Vendors on location, great freebies, GO Run Merchandise for sale, music & a kid's zone.

Food & beverages will be provided before and after the race.

| Last Name | | Fi | rst Name | | | Sex | _ Age | |
|----------------------|--------------------------|--|-------------------|-----------------|--------------|---------------|----------------|----|
| Address | | Cit | y, State & ZIP | | | | | _ |
| DOB | Phone | Email | | | | | | |
| Category: Runner/ | Walker Racewalker | Event: ADULT: 5K Fun Rui | n Runner in Sprit | YOUTH (10 a | nd under): 5 | K Fun Run Ru | nner in Spirit | |
| T-Shirt: ADULT: Ty | pe of Shirt: □Performand | ce □Performance (ladies cut) | □Cotton Size: 2 | XS S M L X | L 2XL 3XL | YOUTH (cottor | n): YS YM | YL |
| I am on a TEAM: Y | es No Team N | ame: | | Team C | aptain: | | | |
| I am a cancer (circl | e): Patient Survivor | I would like to walk/run (**Ribbons with person's | • | | | | | |
| YES, I would like to | give a tax deductible d | lonation of \$ | to the USA I | Health Mitchell | Cancer Insti | tute. | | |
| | | rdous activity that could cause injunthis event, am in good health and | | | | | | |

I know that running a road race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature I certify that I am medically able to perform this event, am in good health and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running or walking in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or blades, animals, and radio headsets are not allowed in the race and I will abide by these guidelines. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release LRH Productions, the USA Health Mitchell Cancer Institute, the University of South Alabama and its trustees, officers, agents, servants and employees, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature of Participant _____(Parent/Guardian must sign for participants under 19)

Date

AMOUNT ENCLOSED:

