



5th Annual

SEMC

5K Run/Walk for Health

May 8, 2010

Sleepy Eye Medical Center's 5th Annual 5K Run/Walk for Health

All ages and fitness levels are encouraged
to join us for this fun fitness event.

(No pets or bicycles allowed)

Sponsored by: **Sleepy Eye Healthcare Foundation
and the Sleepy Eye Medical Center**

- Date:** Saturday, May 8, 2010
- Time:** 9:00 a.m. start! (rain or shine) Check-in 8:00-8:45 a.m.
- Cost:** \$10, participants receive a T-shirt and healthy snack breakfast.
Children under 12: \$6 for T-shirt; No charge if you do not request a T-shirt for child.
Children under 12 must be accompanied by parent/guardian registrant.
- Prizes:** Medals to top three male and female finishers
- Pre-Register by April 24 please. T-Shirt availability limited for late registrants.**

Detach and Return with Registration Fee, checks to: Sleepy Eye Healthcare Foundation

Return to: Naomi Weiss, Sleepy Eye Medical Center, PO Box 323, Sleepy Eye, MN 56085.

RELEASE: In consideration of being permitted to participate in the run/walk event sponsored by the Sleepy Eye Healthcare Foundation on May 8, 2010 known as the SEMC 5K Run/Walk for Health (referred to as the run/walk), for myself and my personal representatives, heirs, assigns and next of kin, and being of lawful age, I release, discharge and covenant not to sue Sleepy Eye Healthcare Foundation, or its officers, sponsors, advertisers, or the owners and lessees of the premises on which the run/walk is conducted, and each of them and their respective officers and employees (all referred to collectively as "Releasees"), from any and all liability to me or to my personal representatives, heirs, assigns or next of kin, and from all loss or damage, and any claim or damage, on account of injury to person or property or death, whether caused by the negligence of Releasees or otherwise, while I am competing or for any purpose participating in the run/walk. I further release all officials and professional personnel from any claim on account of first aid, treatment or service that may be rendered me while participating in the run/walk. I assume full responsibility for any risk of bodily injury, death or property damage due to negligence of Releasees or otherwise while in or on the course of the run/walk, and while competing or for any purpose participating in the run/walk. I agree that I have adequately prepared for the run/walk and am physically fit to compete or participate in this event. I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Minnesota, and that if any portion of the agreement is held invalid, the balance shall, notwithstanding, continue in full legal force and effect. Photographs, videotapes or televising may be used for such subsequent publication as may be deemed appropriate by Sleepy Eye Healthcare Foundation or other persons responsible for the photography; including newspapers, bulletin boards and Sleepy Eye Medical Center website on the internet. I have carefully read this Release, know its contents and sign this Release as my own free act, and agree that the terms of this Release are contractual and not a mere recital.

Signature

Date

I hereby give permission for the undersigned minor to participate in the run/walk event sponsored by the Sleepy Eye Healthcare Foundation on May 8, 2010 known as the SEMC 5K Run/Walk for Health. I hereby waive any claim or cause of action of any nature arising as a result of or in connection with the undersigned minor's participation in said event.

Signature of Minor

Date

Signature of Parent of Guardian

Date

SEMC 5K Run/Walk for Health Registration

Name: _____ Phone: _____

Address: _____
address city state zip

T-Shirt Size Adult Sizes: Small _____ Medium _____ Large _____ XL _____ XXL _____

Youth Sizes: 2/4 _____ 6/8 _____ 10/12 _____ 14/16 _____

T-Shirts will be distributed at Check-In on the day of the Run/Walk for Health.