

# Kellsie's Hope "Sock It To Cancer"

## 7th Annual 5K Walk/Run

### September 23, 2018 8:00 am



**All Proceeds benefit Kellsie's Hope Foundation Fighting Childhood Cancer. "SOCK IT TO CANCER" BY WEARING CRAZY SOCKS AND/OR DONATING SOCKS FOR CHILDREN IN THE AREA HOSPITALS**

#### Event Details

**What:** 5K Walk/Run or 1 Mile Fun Walk  
**Where:** Drost Park Pavilion 1 - 8 Schiber Ct. Maryville, IL  
**When:** SUNDAY September 23 2018  
 Registration begins at 7:00 am  
 5K Walk/Run will begin at 8:00 am  
 1 Mile Fun Walk will immediately follow

#### Registration

**Entry Fee:** \$25 per person by September 16th  
 \$30 late entry & on race day  
**Family Registration:** \$80 for family of 4 by September 16th  
**FEE INCLUDES EVENT T-SHIRT AND FINISHER MEDAL**  
**ONLINE REGISTRATION:** [www.kellsieshopefoundation.com](http://www.kellsieshopefoundation.com)

**Timing is provided by Toolen's Running Start**  
**Awards Ceremony will immediately follow the race. Trophy awarded to top male and female finisher, overall and in each age group: 10 & Under; 11-19; 20-29; 30-39; 40-49; 50-59; 60 & over**

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#### **Registration Form (Each participant or guardian MUST initial form to agree with waiver)**

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

| Name | Event<br>(Circle One)  | Sex    | Age   | Birthday    | T-Shirt Size                         | Initial for<br>waiver |
|------|------------------------|--------|-------|-------------|--------------------------------------|-----------------------|
|      | 5K Race<br>1 Mile Walk | M<br>F | _____ | ___/___/___ | Youth: M L XL<br>Adult: S M L XL XXL |                       |
|      | 5K Race<br>1 Mile Walk | M<br>F | _____ | ___/___/___ | Youth: M L XL<br>Adult: S M L XL XXL |                       |
|      | 5K Race<br>1 Mile Walk | M<br>F | _____ | ___/___/___ | Youth: M L XL<br>Adult: S M L XL XXL |                       |
|      | 5K Race<br>1 Mile Walk | M<br>F | _____ | ___/___/___ | Youth: M L XL<br>Adult: S M L XL XXL |                       |

Make Check payable to Kellsie's Hope (may register online or mail this form to PO Box 331 Maryville, IL 62062)

**Mandatory Waiver (initial above and sign):** I understand running/walking a race is a potentially hazardous activity. I know I should not enter a run/walk unless I am medically able and properly trained. I certify I am medically able and properly trained to perform this event. I assume all risks associated with running/walking this event. Having read this waiver, my signature verifies I understand these facts and that the entry fee is non-refundable. I, for myself and anyone entitled to act on my behalf, waive and release Kellsie's Hope Foundation, Village of Maryville, Madison County, Toolen's Running Start, all other sponsors, and their volunteers, representatives, and successors from all claims or liabilities of any kind arising from my participation in this race. I grant permission to all foregoing to use any photographs, recordings, or any other record of this race for legitimate purposes.

Date \_\_\_\_\_

Signature of entrant (parent/guardian must sign for minor entrants)