



Relay for Life of Greene County Hero 5k Run/Walk

Superheroes will run/walk a 5k course or a shorter course for our heroes in training (or complete both courses). This is an event in conjunction with the Relay for Life of Greene County. All participants will receive a t-shirt and meal ticket.

Wear your best costume for a chance to win prizes and to avoid paying the \$5 villain costume fee. Prizes will be awarded to following categories-- best individual, best duo, best team (3 or more)

Find us on Facebook! www.facebook.com/relayforlifeofgreenco

Check out our website: www.relayforlife.org/greencountyia

Date Saturday, April 21, 2018

Time 9:30-10:15 am- Check in/Registration
 10:20 am- Survivor Walk
 10:30 am- Heroes in Training (run/walk from GCCC around square and back)
 10:45 am- 5k Start

Location Jefferson, IA-- Greene County Community Center, 204 W. Harrison

Fee *On or before April 13 (postmarked on 4/13)-- \$20- 13 years or older/ \$10- 12 years & under*
April 14 and after-- \$25- 13 years or older/ \$15- 12 years & under
Checks payable to American Cancer Society
Best efforts will be made to host event rain or shine. Donation fees will not be refunded.

Drop off or mail registration to the
Greene County Community Center
204 W. Harrison St., Jefferson, IA 50129

Name _____ Age on day of event _____

Address _____ City _____ State _____ Zip _____

Primary Phone _____ Email _____

T-Shirt Size YS YM YL AS AM AL AXL AXXL

Waiver & Medical Authorization

In consideration of being permitted to participate in Greene County Relay for Life Color Out Cancer 5K I, the undersigned participant (or, if under age 18, the participant's parent or legal guardian on his or her behalf): (i) recognize and acknowledge that such activity may involve risk of bodily injury or property damage, (ii) assume full responsibility for and risk of any bodily injury, damage or loss which may occur as a result of participating in such activity, (iii) release, waive, discharge and covenant not to sue the American Cancer Society and or the Greene County Relay for Life and their administrators, officers, employees, members of governing and advisory bodies, representatives, agents, and volunteers (the "releasees") from all liability to the undersigned for any and all damage or loss, and any claim or demand therefor, on account of injury to my person or property, whether due to negligence of the releasees or otherwise, as a result of participating in any such activity or program, (iv) agree to indemnify and hold harmless the releasees identified above from any and all loss, liability, damage or cost that they may incur as a result of my participation in any such activity or program, (v) in the event of any injury or illness while participating in such activity or program authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel, and (vi) consent to my picture being used for publicity or promotional purposes. I HAVE READ AND FULLY UNDERSTAND THIS WAIVER AND MEDICAL AUTHORIZATION AND VOLUNTARILY SIGN IT.

Signature: _____

Date: _____

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