



## Registration Form

April 4, 2020 • Fairpark • Downtown Tupelo

To register for the Race, visit [www.racesonline.com](http://www.racesonline.com) or in person at the Center for Digestive Health, 589 Garfield St., Tupelo.  
 Early bird registration by 3/6/20: \$25 • Preregistration: \$30 • Race-day registration: \$35  
 Race registration includes a short sleeve T-shirt while supplies last.

\_\_\_\_\_  
 Last Name First Name MI

\_\_\_\_\_  
 Street Address or P.O. Box No.

\_\_\_\_\_  
 City / State / Zip

Date of Birth \_\_\_\_\_ Age on Race Day \_\_\_\_\_ Sex \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

T-Shirt Size  S  M  L  XL  XXL

Make checks payable to the Health Care Foundation.

By signing below, I accept and assume all risks associated with my participation in this 5K race. Also by signing below, I release, indemnify and hold North Mississippi Medical Center, its parent corporation, North Mississippi Health Services, and its affiliated subsidiaries, and their respective directors, officers, employees and agents harmless from any and all claims, liabilities, damages, costs and expenses, including reasonable attorneys' fees and defense costs, from any injury or illness that might occur arising out my participation in this 5K race.

**WARNING: YOU SHOULD CONSULT A PHYSICIAN PRIOR TO BEGINNING ANY TYPE OF EXERCISE REGIMEN, ESPECIALLY IF YOU HAVE A HISTORY OF HEART DISEASE, A DISEASE SUBJECT TO AGGRAVATION BY EXERCISE, OR ANY OTHER HEALTH CONCERN.**

\_\_\_\_\_  
 Runner's signature Date

\_\_\_\_\_  
 Parent or guardian if under eighteen (18)