

# Making Strides Against Breast Cancer of Southern Illinois 4th Annual 5K Run/Walk & Kids Run

Visit our website: [www.MakingStridesWalk.org/SouthernIllinoisIL](http://www.MakingStridesWalk.org/SouthernIllinoisIL)



**MAKING STRIDES  
Against Breast Cancer®**



- ◆ Registration begins at 8:00am
- ◆ The 5K will begin at 9:00am
- ◆ Pre Registration fee: \$25 (includes t-shirt)  
*Register by 9/15 to guarantee t-shirt*
- ◆ Day of Event Registration: \$30 (includes t-shirt)
- ◆ 0.70 Mile Kid's Fun Run ages 0-12-  
Medals for all kids. No T-shirt- \$10, With Shirt- \$25
- ◆ Computerized Timing by River to River Running Club
- ◆ Medals will be awarded to top runners
- ◆ Join us early for entertainment, food, prizes, & more!
- ◆ Door prizes, fruit and water provided
- ◆ Questions? Contact Alli Arvanis at 618.998.9898 opt. 3 or [alli.arvanis@cancer.org](mailto:alli.arvanis@cancer.org)
- ◆ Participants are encouraged to raise additional funds to benefit breast cancer research & services.

**Saturday, October 5, 2013  
9:00 AM**

***Harry L. Crisp Sr. Sports Complex***  
1606 S. Carbon St., Marion, IL 62959

Make checks payable to **Making Strides Against Breast Cancer** and return bottom of registration form to:  
American Cancer Society—4503 W DeYoung, Suite 200C—Marion, IL 62959

**Name:** \_\_\_\_\_ **Team Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/ZIP:** \_\_\_\_\_ **Age (on race day):** \_\_\_\_\_

**Circle Gender:** M F **Circle One:** 5K Run 5K Walk Kid's Run w/medal Kid's Run w/ Shirt

**T-Shirt Size:** Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult 2XL Adult 3XL Please Keep My Shirt

**Circle One:** I am a Cancer Survivor I am/was a Caregiver to someone with cancer

THE AMERICAN CANCER SOCIETY CARES ABOUT YOUR PRIVACY AND PROTECTS HOW WE USE YOUR INFORMATION. TO VIEW OUR FULL PRIVACY POLICY OR IF YOU HAVE ANY QUESTIONS PLEASE VISIT US ONLINE AT [CANCER.ORG](http://CANCER.ORG) AND CLICK ON THE "PRIVACY" LINK AT THE BOTTOM OF THE PAGE OR CALL US ANYTIME AT 1-800-227-234

Waiver of Liability: IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN MAKING STRIDES AGAINST BREAST CANCER, I HEREBY FOR MYSELF, MY HEIRS, AND MY PERSONAL REPRESENTATIVES ASSUME ANY AND ALL RISKS THAT MIGHT BE ASSOCIATED WITH THE EVENT. I FURTHER WAIVE, RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE AMERICAN CANCER SOCIETY, ITS OFFICERS, EMPLOYEES, SPONSORS, ORGANIZERS, VOLUNTEERS OR OTHER REPRESENTATIVES OR AGENTS OR THEIR SUCCESSORS AND ASSIGNS FOR ANY AND ALL INJURIES OR DAMAGES OF ANY KIND WHATSOEVER SUFFERED AS A RESULT OF ME AND/OR MY CHILD TAKING PART IN THE EVENT AND ANY RELATED ACTIVITIES. I ALSO AGREE TO THE USE OF ANY PHOTO, FILM, OR VIDEOTAPE OF THE EVENT FOR ANY PURPOSE. I ALSO GIVE MY FULL PERMISSION FOR SUCH FIRST AID AS DEEMED NECESSARY TO BE PROVIDED TO ME OR MY CHILD ON THE PREMISES OR PRIOR TO TRANSPORT TO A HOSPITAL FOR FURTHER TREATMENT.

X \_\_\_\_\_

Participant's Signature (or Parent's signature if under 18 years of age)

Date



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