



## November 12, 2016 at King's Home Chelsea Campus

221 King's Home Drive (Mail: PO Box 162) Chelsea, AL 35043

Parking is at Forest Oaks Elementary School

For more information, please contact Brooke West

[bwest@omegacapitalllc.com](mailto:bwest@omegacapitalllc.com) or (205) 871.8131 ext. 12

<p><b>Registration Information</b></p> <p><b>5K All Ages</b> *Registration Begins at 7:00 AM</p> <p>Before October 1<sup>st</sup> \$25 After October 1<sup>st</sup> \$30 Day of \$35</p> <p>*Pre-Packet Pick Up will be November 11<sup>th</sup> at Trak Shak 280 from 2:00 PM – 6:00 PM - Or you can pick-up day of at registration before 7:45 AM</p>	<p><b>Schedule</b></p> <p><b><u>Rain or Shine Event!</u></b></p> <p>Registration begins: 7:00 AM 5K Begins: 8:30 AM Awards Begin: 9:30 AM</p> <p>*Parking: Forest Oaks Elementary School</p> <p>**Please stay afterwards and enjoy the FREE 7<sup>th</sup> Annual Kampfire For The King Family Friendly Outdoor Event with Live Music, Fishing, Kid Zone, and MORE!</p>	<p>The undersigned, _____ (participant), desires to voluntarily participate in the HOPE RUN 5K on November 12, 2016. She/He is aware accidents or illness can occur during road running and that he/she may be seriously injured or killed as a result. Participant acknowledges the potential dangers involved in connection with road running and expressly agrees to assume all risk of injury, death, or property damage in connection with Hope Run 5K. Participant releases and holds harmless and forever discharges King's Home, City of Chelsea, County Sherriff's Department, COP, Employees, Officers, Directors, Agents, Representatives, Affiliates, Volunteers, Championship Racing / RRCA, and any other affiliates associated with HOPE RUN 5K from all liabilities, actions, claims, damages, costs, fines, penalties, expenses, or lawsuits of any kind arising from or related in any way to their participation in Hope Run 5K. The execution of this agreement constitutes a full and complete release of King's Home for all costs or damages which may be incurred as a result of participant's decision to participate in Hope Run 5K. Be signing below, the undersigned acknowledges this agreement and that he/she understands the terms herein are contractual and not mere recital, and that they have signed this Assumption of Risk and Hold Harmless Agreement voluntarily. The undersigned understands that this is a release of liability.</p> <p>_____ Signature / Date</p> <p>_____ Printed Name</p>
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Name \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Age \_\_\_\_\_ Shirt Size \_\_\_\_\_ (Youth L, Adult S, Adult M, Adult L, & Adult XL)

Mail to: King's Home, Attention: Valerie Goodman, PO Box 162, Chelsea, AL 35043. Make Checks Payable to: King's Home. To pay by credit card, please write on the form, and we will call you once we receive the completed and signed form.

Pay by credit card (please print)

Type of card \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Amount approved to charge \$ \_\_\_\_\_

Signature \_\_\_\_\_

*I understand that by providing this information and signing that I am authorizing King's Home to charge my credit card for the amount indicated above.*

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