



Fit Family Virtual Run

November 8-13, 2020

fitfamilyrun.com

RACE DESCRIPTION: Family members who exercise together stay together! Get the whole family involved with the Fit Family 5k/1 Mile Run/Walk! Choose your own course to run or walk during the week of 11/8-13. Run with a downloadable race bib and submit your finish times to info@awhn.org. Racers can register to receive a short sleeve cotton shirt and medal with the race logo! Post a photo with your race bib on and tag "Fit Family". Registration fee also includes a contribution for health education in schools by Adventist WholeHealth Network.

REGISTRATION OPTIONS:

- **Fit Family 5K Shirt & Medal: \$25**
- **Fit Family 5k Family Discount: \$21.25 (2 or more registrants from same household)**
- **Fit Family 5k Shirt Only: \$20**
- **Fit Family 5K Medal Only: \$17**
- **Fit Family 5k Registration Only: \$10**
- **Fit Family 1 Mile Medal Only: \$12.50**

RACE DIRECTOR: Adventist WholeHealth Network in Hamburg, PA, a non-profit organization supporting health improvement programs in schools and community centers.

ONLINE REGISTRATION: www.fitfamilyrun.com or www.pretzelcitysports.com
(nominal processing fee applies, closes Friday, November 13, 4:00PM)

*Please complete the following form and return to the address indicated below. Must be postmarked by November 9, 2020.
Registration is not complete until payment is received.*

MAKE CHECK PAYABLE TO "Adventist WholeHealth Network" & **MAIL to:** AWHN, 2363 Mountain Road, Hamburg, PA 19526. (610) 685-9900. Race Director: Ben Parrish: (484) 772-8639, bparrish@awhn.org

-----Please Print Clearly—One Application Per Person-----

Last name _____ First name _____
 Address _____
 City/State _____ Zip _____ Race day age: _____ Date of birth ____ / ____ / ____
 Gender: M F Phone: (_____) _____ A.M. or P.M. Circle event: 5k 1M
 Adult Shirt Size (circle one): S M L XL XXL Youth: M L Email _____

WAIVER: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that there will be traffic on the course and assume the risk for running in traffic. I also assume any or all other risks associated with running or attending the race including but not limited to falls, contact with other participants, the effects of the weather and the condition of the roads, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge Pretzel City Sports, Adventist WholeHealth Network, any subcontractors it utilizes, all municipalities in which the race is held, the race committee, volunteers, any and all sponsors including their agents, employees, assigns or anyone acting for on their behalf, or anyone else associated in any way with the race, from any or all claims or liability for death, personal injury or property damage of any kind of nature what so ever arising out of, or in the course of, my participation in this event(s). This waiver extends to all claims of every kind or nature what so ever, foreseen or unforeseen, known or unknown. By entering this race I am granting permission to Pretzel City Sports and Adventist WholeHealth Network to use any pictures or likenesses of me secured at the event in any way they see fit without review, restriction or compensation. I HAVE READ AND UNDERSTAND THIS WAIVER: (if under 18, legal guardian must sign)

Signature _____ date ____ / ____ / 2020 (Parent's Signature if entry under 18 years old)