

The 9th Annual Charity for Children Run/ Walk

Sunday, May 21st, 2017 – Green Lakes State Park, NY

Name: _____ Sex: _____ (M/F): AGE (race day): _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____ Phone: _____

How did you hear about the event??

PostCard ___ Lawn sign ___ Poster ___ Fleet Feet ___ Website ___
Billboards ___ Returning? ___ Other (please note) _____

EVENT: 8k Run: ___\$40* 5K Run: ___ \$40 5K Run/Youth (U15): ___\$20
"Beast of the East" (both 8K & 5K Run) ___\$50
5K Walk: ___\$40 Kids Fun-Run: ___\$10 AGE on Race Day: _____
Shirt Size (circle one that applies) **Small Med Lg XL**

***LATE REGISTRATION FEE \$45** (still \$20 Youth Division 5K or \$10 – Kids Fun Run, \$55 Beast of the East) *May 15th thru May 19th. \$50 Race Day registration.

*Times: 8K Start 9am – Kids fun-run 9:15am – 5K Run & 5K Walk 10am
Packet Pick-Up: Saturday, 5/17 9am to 1pm at Fleet Feet, Dewitt*

SPONSORSHIP/DONATIONS: Please visit www.CFCRunWalk.com (see "Incentive Level Awards)! Check the option to "FundRaise"!

Please send registration and check payable to:

**Charity for Children, P.O. Box 204, Syracuse, NY 13206 C/O Nina Albino
Or...Register Online: www.CFCRunWalk.com**

Please see www.CFCRunWalk.com for more race details to follow.

Contacts: Race Director, Michael Centore 315.559.7749 mdcentore@gmail.com

I agree to hold harmless Charity for Children, the race committee, vendors, volunteers, and sponsors, from all cost and liability arising out of my participation. I hereby waive all my claims for damage or loss to my person or property which may be caused directly or indirectly from my participation and hereby assume liability for any loss, damage, or other liability from the Charity for Children Run/ Walk 2012. I give my permission for medical release should I be involved in any accident or health-damaging situation or should I require medical treatment. I hereby attest that I am in proper health and physical condition to participate. I hereby grant full permission to use any photographs, videotapes, recordings or any other record of this event for promotional purposes.

parent/ guardian if under 18) Date: _____ Signature (participant or

PLEASE SEE OPPOSITE SIDE FOR SPONSORSHIP FORM...

2017 Charity for Children Run & Walk Sponsorship Form

Name	Address	City	State	Zip	School	Donation Amount
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1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

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11. _____

12. _____

13. _____

14. _____

15. _____

16. _____

17. _____

Total: \$

Incentive Level Awards: \$100 CFC Mason Jar, \$250 tech Vest , \$500 tech Vest + \$50 Fleet Feet Gift Certificate, \$1,000 tech Vest + FitBit Surge watch

*** Please make checks payable to Charity For Children Inc.**