



Joshua's Wish 5K Run/Walk & Awareness Walk

Saturday, September 16, 2017 8:30 A.M.

Amerson River Park
2551 N. Pierce Circle, Macon, GA

Benefiting



For additional information, contact:
Joshua's Wish
Phone: 478-361-3541
E-mail: joshuaswish@yahoo.com
www.joshuaswish.org



2017 Registration Form

September is *Childhood Cancer Awareness Month*! Please join us on September 16th at Amerson River Park, 2551 N. Pierce Circle, Macon, Georgia 31204, for the 8th Annual 5k & Awareness Walk for Joshua's Wish. Our goal for this year is to raise \$20,000 for pediatric cancer research. Pediatric brain tumors and childhood cancer in general require specific research and treatments from those for adults.

Opening Ceremonies begin at 8:30 a.m. and will feature a balloon release in honor and in memory of all children who are battling or have battled cancer. In addition to the run/walk, enjoy food, face painting, and more! **PACKET PICK UP - September 15, 2017 5:00 pm at Peyton Anderson Center located at 277 Martin Luther King Blvd. Macon, Georgia**

Run/Walk Schedule

7:30 Check-in/ Registration

8:30 Opening Ceremonies

9:00 5k Run/Walk begins

Awareness Walk (after 5K non-competitive)

Awards Ceremony

Prizes are awarded to the TOP THREE finishers in each age group.

Registration Fees

Early Registration 5K Run/Walk (by September 2nd)
Awareness Walk (by September 2nd) \$25

Late Registration 5K & Awareness Mile (after September 2nd) \$30
Youth (includes youth size t-shirt) \$15

Late Registration Youth (after September 2nd) \$20
Walk or Run in the Spirit (t-shirt mailed) \$35

Children 4 and under free (does not include t-shirt)

***only early registration runners/walkers guaranteed t-shirt**

Name _____ Age: _____ Gender: Male or Female (circle one)

Mailing Address _____ City _____ State _____ Zip _____

E-mail Address _____ Phone _____

T-shirt Size: Child: S M L or Adult: S M L XL XXL XXXL

5K

Awareness Walker

T-shirts will be mailed to those who Walk or Run in the Spirit

Prizes Awarded to LARGEST TEAM and TOP FUNDRAISING TEAM

Check Box If...

Team ~ Name: _____

Sponsor ~ Name: _____

Joshua's Wish Hero

Phantom Runner/Walker

Waiver: In consideration of acceptance of this entry, I waive any and all liability claims for myself against Joshua's Wish, City of Macon, sponsors, and volunteers for damages, injuries, or illness which I may receive as a result of my participation in Joshua's Wish run/walk. I further State that I am in proper physical condition to participate in any part of this event. In case of a rain cancellation, my Registration fee will be considered a donation.

Signature _____

Signature of a Parent (if minor) _____

Please return this completed form with registration fee to Joshua's Wish, 277 Martin Luther King Blvd. #5 Macon, Georgia 31201

Do not send cash through mail.

Checks or Money Order ONLY

