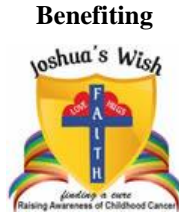


Joshua's Wish 5K Run/Walk

Saturday, September 14, 2019 8:00 A.M.

Tattnall Square Park
1155 College Street, Macon, GA



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

2019 Registration Form

September is *Childhood Cancer Awareness Month*! Please join us on September 14th at Tattnall Square Park, for the 10th Annual 5k for Joshua's Wish. Our goal for this year is to raise \$30,000 for pediatric cancer research. Pediatric brain tumors and childhood cancer in general require specific research and treatments from those for adults.

Race & Kids Field Day activities begin at 8:00 a.m. We will honor children battling cancer and remember those who were taken. In addition to the run/walk, enjoy kid's field day activities, food, face painting, and more! **PACKET PICK UP - September 13, 2019 5:00 until 6:30pm at Peyton Anderson Center located at 277 Martin Luther King Blvd. Macon, Georgia in the Juanita Jordan Room**

Run/Walk Schedule

7:00 Check-in/ Registration

7:30 Warm Up

8:00 5K Run/Walk & Kids Field Day begins

Awards Ceremony

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

Prizes for all Kids participating in Field Day

Registration Fees

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

FOR 2XL & 3XL T-SHIRTS - ADD ADDITIONAL \$2

Register online at www.joshuaswish.org

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

Kids Field Day

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

FOR 2XL & 3XL T-SHIRTS - ADD ADDITIONAL \$2

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, Macon Amstar, 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