

# 3<sup>rd</sup> Annual FAYETTE 5K

Proceeds to benefit Youth fitness/wellness programs  
at HealthWorks Fitness and Wellness Center

**APRIL 7TH, 2012 · 9:00AM | 20TH & INDIANA AVENUE · CONNERSVILLE, INDIANA**

## COURSE

Course starts and finishes at the intersection of 20th and Indiana Avenue next to Fayette Regional Health System. The course will run North through local neighborhoods, into Roberts Park, with the finish down Grand Avenue.

## AWARDS

- Trophies, as well as a 2013 entry fee, will be awarded to the male and female overall winners for walk, run and wheelchair so they can come back and defend their title.
- Medals will be awarded to age group winners.
- Age groups: 14 & Under; 15-19; 20-29; 30-39; 40-49; 50-59; 60 & Over
- Awards will be presented as soon as possible after all participants have finished.
- Door Prizes Awarded: Approximately 25 door prizes will be given away. Must be present to win!

## REGISTRATION

**ONLINE REGISTRATION AVAILABLE:** <http://www.signmeup.com/81785>

Pre-Registration: \$12.00 includes t-shirt (runners/walkers/wheelchairs)

Race Day Registration: \$15.00 includes t-shirt, while supplies last and no size guarantee

Kid Fun Runs: \$5.00 (0-3/ 4-5/ 6-8) sign up day of the event, starts after 5K awards presentation

Packet Pick: Friday 4/6/12 at FRHS from 1pm-4pm or from 7:30-8:45am day of race

## RESULTS

Results will be announced at the race and posted in a timely fashion on [Indianatiming.com](http://Indianatiming.com).

### SPECIAL THANKS TO SOME OF OUR SPONSORS:



### REGISTRATION FORM

Run  Walk  Wheelchair
   
 Name \_\_\_\_\_ Age on Race Day \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_
   
 T-Shirt Size: S M L XL XXL
   
 Address \_\_\_\_\_
   
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
   
 Phone \_\_\_\_\_
   
 Email \_\_\_\_\_

**Make Checks Payable to:** Fayette Regional Health System

**Mail Entry to:** Jonathan Allen  
Fayette 5K  
1941 Virginia Avenue  
Connerville, IN 47331

**Event Waiver (must be signed to participate):** In consideration of your accepting my entry, I hereby release, discharge, and agree to hold free and harmless Healthworks Wellness, Fayette Regional Health System, City of Connerville Indiana, race director, and any sponsors, volunteers, or organizers of this event and each of them together with their successors, assigns, officers, agents, and employees from any and all liability for injuries to property or person suffered by me as a result of my participation in this event. By execution of this release and waiver, attest that I am physically fit and prepared for this event. I grant full permission for organizers to use my name, photographs, and video of me in promotions for this event.

Signature (parent/guardian signature if under 18) \_\_\_\_\_ Date \_\_\_\_\_

