

1 MILE
5 K
10 K

PINK

RUN

SATURDAY, OCT. 12, 2019

TOWLE PARK

SNYDER, TEXAS

7:30 Check-In / Late Registration

Start Times: 8:30 10K | 8:45 5K | 9:00 1 mile

 **Race registration (September 2 - 30, 2019) Includes t-shirt!**

Name of participant: _____

Email address: _____ Phone#: _____

Address: _____ City: _____ State: _____ Zip: _____

Choose your Event: 1 mile Run/walk: _____ 5K Run: _____ 10K Run: _____

DOB: _____ Age: _____ Male _____ Female _____



Race Entry Fee Includes FREE Race t-Shirt if registered before 9/2-9/30:

13-99 years: \$30 _____

12 & Under: \$25 _____



T-Shirt Size

Youth S M L XL Adult S M L XL 2XL(add\$2) 3XL(add\$4) 4XL(add\$4)

T-shirts are included in your registration fee if you register by September 30, 2019! They will be available for pickup when you turn in your registration form. For late registrations, shirts will be available for purchase starting at \$20.



Register: Please bring or mail this form and payment to the Radiology Department at Cogdell Memorial Hospital 1700 Cogdell Blvd., Snyder, Texas 79549. If bringing this form in person, please stop by between the hours of 8am - 5pm Monday - Friday. You may also register online by visiting <https://pinkrun2018.eventbrite.com>



Run Route: Check out & run the route ahead of time! www.mapmyrun.com -> search routes -> Cogdell Pink Run



Funds raised help uninsured and underinsured women of Scurry County access screening mammograms for a discounted rate (or free for those who qualify) rate.

Waiver for race participants: I know that participating in a road race is a potentially dangerous activity. I assume full and complete responsibility for any injury, accident or health related issues which may occur to me during the race as a result of my participating in the race, or while I am on the premises of the event and I hereby release and hold harmless the sponsors, promoters, and all other persons, and entities associated with the event or their agents, employees, or otherwise. I further certify that I am in good physical condition and fully able to participate in the event. I grant full permission to any and all foregoing to use any photographs or records of this event. I understand that fees are non-refundable and non-transferable. I have read, understand, and voluntarily signed this agreement. If the participant is a minor, I agree that the minor has my consent to participate in the event.



Participant's Signature / Date _____

Signature of Parent / Guardian (for minors) _____

Total Payment Received: \$ _____ by _____ (initials) Payment form: Cash _____ Check #: _____