



Harrisonburg's 5K Walk/Run for Autism

Saturday April 21st, 2012



University Commons at Eastern Mennonite University

Hosted by JMU's Gamma Sigma Sigma, Circle K and FIJI with Shenandoah Valley Autism Partnership

Proceeds will benefit the Shenandoah Valley Autism Partnership

7:15 a.m. to 8:30 a.m. Race Day Check in
7:15 a.m. to 8:15 a.m. On Site Registration
9:00 a.m. Introductions
9:30 a.m. 5K Race Begins

Refreshments will be provided before and after the race

Pre Race Packet pickup will be available on the evening of April 19th and 20th

T-shirts will be provided to all participants registered by March 30th

Top two in each age and gender division will receive a prize
(<14, 15 - 19, 20 - 29, 30 - 39, 40 - 49, 50+)

Contact us at:

valleyautismrace@gmail.com

Mail in Registration:

Jenny Hummel
145 Sugar Mill Lane
Weyers Cave, VA 24486

One form per participant

Online Registration

www.runwalkjog.com/autism

Name: _____

Group (if applicable): _____

Address: _____

Email: _____

Phone: _____

Age Division: _____

T-shirt Size: _____

(T-shirt deadline March 30th. Adult size only: small, med, large, XL, XXL)

Gender: Female _____ Male _____

Sign Up for

Registration Fee

___ 5K Run (individual)	\$20 (before March 30); \$25 (after March 30)
___ 5K Walk (individual)	\$20 (before March 30); \$25 (after March 30)
___ 5K Run (group 5+)	\$15
___ 5K Walk (group 5+)	\$15

Total: _____

Children under 5 are free. Register if participating.
No T-Shirt

**Make check payable to: Shenandoah Valley Autism Partnership
No Refunds after March 30**

Waiver: I hereby release the City of Harrisonburg, its employees and volunteers, as well as any other organization associated with this event including Gamma Sigma Sigma, Circle K and FIJI, Shenandoah Valley Autism Partnership, and Eastern Mennonite University from all claims for damages arising from any accident or injury, which are caused or arise from the participation of the above name applicant during the Harrisonburg 5K Walk/Run at any facility or at any location that the program is held .

Signature: _____

(Parent/Guardian's signature if participant is less than 18 years old)

Date: _____