



Megan's Wings Foundation

MAIL -IN REGISTRATION FORM

6th Annual Megan Savage Memorial

Run for a Cure

Saturday, September 25th, 2010 5K Starts @ 9am

*McCarthy Park

*2046 N San Antonio Ave.

*Upland, CA 91784

*Early Packet Pickup Friday 5-7pm @ McCarthy Park *Same Day Registration & Packet Pickup SAT -7:00am

SCHEDULE OF EVENTS

Early Packet Pickup - 5-7pm
Friday Nite, Sept. 24th @
McCarthy Park

RACE DAY

**7:00 AM *Same Day
Registration & Packet
Pickup begins**

**8:45 AM *1K Kids
Fun Run**

**9:00 AM *5K Run/Walk
(3.1mile)**

**10:00 AM *Award
Ceremony & Raffle**

**11:15 AM *Butterfly
Release in memory of all
those who have lost
their life to cancer.**

REGISTRATION

EARLY REGISTRATION:
(Through September 11th @ 11pm)
ADULTS & KIDS (13+): \$25
KIDS (12 & UNDER): \$15

LATE REGISTRATION:
(After Sept. 12th - Sept. 23rd @ 5pm)
ADULTS & KIDS (13+): \$30
KIDS (12 & UNDER): \$20

IN PERSON REGISTER:
DAY OF RACE
ADULTS & KIDS (13+): \$35
KIDS (12 & UNDER): \$25

BUTTERFLY RELEASE
Butterfly Purchase is **separate from**
entry fee. **Please include an**
additional \$5 for each butterfly
you'd like to purchase & release after
the 5K. Release time approx.
11:15am

MAKE CHECK PAYABLE TO:

 **Megan's Wings
Foundation**

MAIL REGISTRATION FORM & FEE TO:

**Megan's Wings
5K Memorial Run/Walk
1735 Kelly Avenue
Upland, CA 91784**

Registration fee includes:

Entry into 5K or 1K,
event t-shirt, goodie bag,
water & continental breakfast for
each participant!

5K or 1K REGISTRATION FORM (Please complete one per participant & mail as one packet.)

Participant Name (One form per participant -copies OK): _____ 5K or 1K Fee: \$ _____

Address: _____ Butterfly \$ _____ **Total Enclosed \$** _____

City: _____ State _____ ZIP _____

Phone: _____ Email: _____

Male: _____ Female: _____ Age on Race Day: _____

SHIRT SIZE: (Please circle one) Child / Adult: S M L XL Adult XXL	ENTER ME INTO: (Please circle one) 5K RUN/WALK 1K KIDS FUN RUN
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Waiver: Must be signed by all participants!!

With my signature, I acknowledge that running and walking can be an inherently strenuous activity and that no event is without risk. I have consulted with my physician regarding my physical capacity to participate in this event and am following physician's advice. I hereby waive all claims against Megan's Wings Foundation, Runner's Image, all race sponsors, officials, race organizers, volunteers, the City of Upland, and any person functioning with respect to the event for any injury, accident or physical conditions I might suffer in this event. I grant full permission for organizers to use my name, likeness, or voice and photographs, videotapes or quotations from me in accounts and promotions in any medium of this event, and of the activities of The Megan's Wings Foundation. This permission is perpetual and worldwide.

MUST BE SIGNED BY EACH PARTICIPANT

DATE

(parent or guardian signature if under 18)

Emergency Phone Number