



REGISTER AT WWW.HOSPICEMINISTRIES.ORG/5K | \$25

STARTS AT 8AM

450 TOWNE CENTER BLVD., RIDGELAND

SATURDAY

MAY 4, 2019

REGISTRATION

Pre-register online at www.hospiceministries.org/5K or complete a registration form and return it to Hospice Ministries at the address listed by May 2, 2019. You may also drop this form off at our office.

PACKET PICK-UP

Packets may be picked up at Hospice Ministries from 12:00 PM to 6:00 PM on Friday, May 3, and on race day beginning at 7:00 AM.

TEAMS AND GROUPS

Participants are encouraged to walk or run as a team or a group. Teams are a great way to show your support for a patient or loved one. Many teams wear signature items centered around the team.

AWARDS

Awards include Male and Female Overall Winners. Awards will be given to the 1st, 2nd & 3rd place winners by age group, gender and event.

1 Mile Fun Run

Medals will be presented to all children who complete the Fun Run.

LAST MILE MEMORIAL SIGNS

In the last mile of the race, we provide a special opportunity for participants to honor their loved ones. We provide signs for \$25 per sign that can be placed on the race course visible for runners to see as they finish the last mile of the race. You may keep the sign after the race.



To order, check the box in the registration section of this form. You'll be able to write in the name of your loved one on race day.

A Run to Remember is Hospice Ministries, Inc.'s annual 5K walk/run that promotes awareness for hospice care in our community. Hospice Ministries is faithful to the mission that all life matters, regardless of a patient's ability to pay. All proceeds go towards the continued care of patients and families who become a part of the Hospice Ministries, Inc. family.

STARTING TIMES

5K Run 8:00 a.m.
 5K Walk 8:05 a.m.
 1 Mile Fun Run 9:00 a.m.

The course will begin and end at Hospice Ministries.

PARKING is available at Colonial Heights Baptist Church.



450 Towne Center Boulevard
 Ridgeland, MS 39157
 1-800-273-7724 | 601-898-1053

In consideration of your acceptance of the race entry, I, for myself, my heirs, and executors, forever release, and/all rights, demands, claims, for damage and causes of suite action known or unknown that I may have against Hospice Ministries, SISU Racing, and all participation in said race, that I assume those risk, that I will assume and pay my own medical and emergency expenses in the event of an accident, illness or other incapacity, regardless of whether I have authorized such expenses and that I am physically fit and sufficiently trained to participate in the race. If I have a heart condition or high blood pressure, I certify that I have my physicians approval to participate in this event, with obligation or signature. I acknowledge that any photographs taken at the event may be used in electronic publications, promotional literature or advertising. I also understand the entry fee/donation is nonrefundable.

Signature (Parent/Guardian req. if under 18)

REGISTRATION FORM

	Pre Reg	Race Day
<input type="checkbox"/> 5K Run 8:00 a.m.	\$25	\$30
<input type="checkbox"/> 5K Walk 8:05 a.m.	\$25	\$30
<input type="checkbox"/> 1 Mile 9:00 a.m.	\$15	\$20
<input type="checkbox"/> Spirit Runner** (**T-shirt only)	\$15	
<input type="checkbox"/> Last Mile Memorial Sign	\$25	
<input type="checkbox"/> Additional Donation	\$ _____	
	Total	\$ _____

Make Checks Payable to:
 Hospice Ministries (Attn: Virginia)

Name _____

Address _____

Phone _____

Email _____

Age Birthdate _____

Team/Group Named _____

Male Female

T-shirt size (check ONE) Guaranteed for registrations received by April 20th.

Small Large XX-Large
 Medium X-Large 3XL