

CALLING ALL SUPERHEROES



Sat. Sept. 8

**8 am Registration
9 am Race Start**

Broadford Park

**Pre-Registration \$20
Race Day \$25**

Proceeds will go to Cindy's Fund to support individuals and families fighting cancer.

- **Run/Walk Race**
- **Dress as your favorite superhero**
- **Activities & Family Fun**

Name _____

Address _____

Phone _____

Email Address _____

Male ___ Female ___ Age on Race Day _____ T-Shirt Size* _____

*Register by Aug. 23 to guarantee shirt size.
XXL and larger add \$2.

Waiver of Liability

I hereby release from liability Garrett Regional Medical Center and The Town Of Oakland, all sponsors, race officials, and anyone connected in anyway with GRMC Superhero 5-K Run for any injury or ailment resulting from my participation in the above stated race. I further state that I am aware this race is a strenuous activity, and that I have prepared properly for my participation in it. I do here consent to the use of my name and/or photo in connection with publicity about the event.

Please note: Signature of runner or parent if runner is under 18 years of age.

Date _____

**Make check payable to GRMC 5K Race. E-mail forms to superheroregistration@gcmh.com
or mail to GRMC 5K at 251 North Fourth Str., Oakland, MD 21550.**

Sponsored By

**GARRETT REGIONAL
MEDICAL CENTER**

A PROUD AFFILIATE OF
WVU Medicine

 **Cindy's Fund**

 **Garrett Regional Medical Center**

