

THE BEST PROTECTION IS EARLY DETECTION

Help fight breast cancer in your own community!
Participate in one of western North Carolina's best
road races to benefit Digital Mammography at
Murphy Medical Center.

**Murphy Medical Center's 20th Annual
Two Hours From Anywhere
5K Run | 2-Mile Heart Walk | Kids' Fun Run
Saturday, September 18, 2010**



PARTICIPANT INFORMATION

Walkers, runners, joggers and fitness enthusiasts of all ages and ability are invited to participate.

Date Saturday, September 18, 2010

Time Race Day Registration 7:30 a.m - 8:30 a.m.
Race & Walk Start 9:00 a.m.

Location Murphy Medical Center is five miles from downtown Murphy, NC on E. US Hwy. 64 Alt. The race and walk will start from the Nursing Home parking lot at the rear of the hospital facility. Runners and joggers will find this to be a fast, out-and-back course, which rolls but has no major hills.

Awards To the 5K Top Male and Female, and Top 5K Male and Female Masters and Grand Masters. Top 3 finishers in the following age groups: 10 & under, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-79, 80-89. There will also be awards to the top three male and female walkers in the same age groups. Trophies will be given to all participants in the Kids' Fun Run.

T-Shirts & Refreshments Race T-shirt for all pre-registered runners and walkers. T-shirts for race-day registrants while supplies last. Refreshments and other goodies will also be supplied.

Entry Fee 5K Run or Heart Walk: **\$15 pre-registered, \$20 race day.** Kids' Fun Run free for ages 10 and under.

REGISTRATION FORM

Payment by checks or cash. Make checks payable to Murphy Medical Center Foundation and mail to:
Kathi Osborne, Foundation Director, Murphy Medical Center, 3990 E. US Hwy. 64 Alt., Murphy, NC 28906

Full Name _____ Age _____ Sex _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Circle Race Event

5K Run Heart Walk Kids' Fun Run

Circle T-Shirt Size 5K/Heart Walk

S M L XL 2XL

Check, if applicable

Murphy Medical Center Employee

WAIVER: In consideration and acceptance of this entry form to Murphy Medical Center's 5K Run and Heart Walk, I waive any and all claims for myself and heirs and assigns against the sponsors, organizers and officials of the above race for any injury or illness which may result from my participation. No headphones, wheeled vehicles, dogs, or skaters are permitted in the run or walk.

Signature _____

Under 18, add parent's signature _____