



March of Dimes

May Day 5K

Saturday, May 2, 2009, 9:15 a.m.

Raccoon River Park,
West Des Moines, IA

Entrant Information – Please Print

Name (Last / First) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Sex M F Age On Race Day _____ Daytime Phone _____

Email _____

March for Babies Team Name _____

Yes! I would like a sponsor form to fundraise for the March of Dimes (Fundraisers who reach \$100 receive a March for Babies t-shirt)

Premature birth is the biggest health crisis facing babies today. Every year, more than 500,000 babies are born prematurely in this county. In nearly half the cases, the causes are unknown. Help us find the answers by donating today!

Entry Fee –

NO REFUNDS, TRANSFERS OR DEFERMENTS

\$ _____	\$20.00 before April 20
\$ _____	\$25.00 after April 20
\$ _____	March of Dimes Donation
\$ _____	Total Amount Enclosed

Race Information

Date: Saturday, May 2, 2009

Location: Raccoon River Park, West Des Moines, IA

Packet Pickup: 8 a.m. – 9:00 a.m. at the Coneflower Shelters

Start Time: 9:15 a.m. at the Coneflower Shelters

Course: 5k trail loop around Raccoon River Park

Incentive: First place male and female finisher will each receive a \$25 gift card to Scheel's.

WAIVER - REQUIRED

In consideration of the furtherance of your purposes, objectives, and work and in consideration of your permitting me to participate in March for Babies and/or May Day 5K, on behalf of myself, my heirs, executors, administrators and assigns, by submitting this form or by participating in this event, I hereby waive and release any and all rights and claims for damages that I may have against you, the municipalities through which March for Babies and/or May Day 5K will take place, as well as any other person connected with March for Babies and/or May Day 5K, their heirs, executors, successors and assigns for any and all injuries that I may suffer while taking part in March for Babies and/or May Day 5K or as a result thereof.

As a policy matter, the March of Dimes prefers not to accept restricted donations for March for Babies and/or May Day 5K. However, you may request in writing to have your own personal donation be restricted and the March of Dimes will honor it. Walkers/Runners cannot legally restrict donations on behalf of their sponsor's without the sponsor's written permission.

 X _____
Signature of Applicant Date

 X _____
Signature of parent or legal guardian – for participants under 18 years of age Date

Mail completed entry form with entry fee payable by check to:

**March of Dimes
2910 Westown Pkwy, Ste. 301
West Des Moines, IA 50266**

Questions? Call Lora Thiessen at (515) 243-2244 or email at lthiessen@marchofdimes.com

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