Guardian Industries Corp and Mercy Medical Center present the 2nd Annual Run for the Red 5K Run and Health Walk

Benefitting the Gateway Area Chapter of the American Red Cross

Saturday, November 14, 2009

General Information:

*Race Day registration will be held from 7:30 a.m. – 8:45 a.m. at the DeWitt Fitness Center, 900 14th St. DeWitt, IA 52742. Post race activities will be held at the DeWitt Fitness Center.

Divisions: For Men and Women: 15 & under 16-19 20-29 30-39 40-49 50-59 60-69 70+

Courses: *The race starts and ends at the corner of 14th St. and 8th Avenue.

5K run: One long loop on paved, primarily flat streets, in a residential section of scenic DeWitt, Iowa.

Health Walk: One shorter loop on paved, primarily flat streets, in a residential section of scenic DeWitt.

Awards and Prizes:

*Shirts are guaranteed to the first 200 registrants.

*Trophies will be given to 1st, 2nd, and 3rd overall race winners: medals will be awarded to 1st, 2nd, and 3rd in each division of running.

*Door prizes and refreshments are available due to the generosity of area businesses. Must be present to receive door prizes.

Facilities: All race participants are welcome to use the DeWitt Fitness Center showers and fitness center after the race. The DeWitt Fitness Center is located at 900 14th St. DeWitt, IA 52742.

Early packet pick up will be available at the American Red Cross (1220 13th Avenue North, Clinton, IA) and the DeWitt Fitness Center (DeWitt) on Friday, November 13th from 5 -7 p.m.
Please note when/where you plan to pick up your packet on the registration form below.

Entry Fees & Registration:

Early registration is $15 and goes through October 31, 2009. Starting November 1 through the day of the race, the registration fee is $20. You can also register online at www.getmeregistered.com!

Make checks payable to **Bizzy B Scrubs P.O. Box 311 Clinton, IA 52732.** Please contact (563) 242-5223 or visit www.gatewayredcross.org for more information.

Name:_____ Phone:_____

Address: _____
Street City State Zip

Email Address:_____

____ 5K Run

_____ Health Walk

Packet Pick Up

_____**Early Packet Pick Up** American Red Cross (Clinton)

_____**Early Packet Pick Up:** DeWitt Fitness Center (DeWitt)

_____**Day of Event Pick Up:** DeWitt Fitness Center (DeWitt)

Date of Birth_____ **_____Male** **_____Female** **Shirt Size: __S __M __L __ XL ___XXL (add $2)**

Waiver: In consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, and assigns, waive and release any and all rights and claims for damages against the Gateway Area Chapter American Red Cross, the City of DeWitt, sponsors, officials, volunteers, and workers for any injury or accident suffered by me in connection with the Run for the Red 5K Run/Health Walk on November 14, 2009.

Signature:_____ Date _____
(Parents signature if under 18)