

Race for Your Health

5K Run/Walk & 1 Mile Fun Walk

Saturday, August 28, 2010

9:00 a.m. – P. T. Services



Sponsored by:

P.T. Services
Rehabilitation & Sports Medicine
Excellence in Motion

**All proceeds donated to Challenged Champions
Therapeutic Riding & Equine-Facilitated**

5K Run/Walk - A 5K course routed through the streets of Ottawa. The course will start and finish in P.T. Services parking lot. Awards will be given.

Age divisions: 19 & under, 20 – 29, 30 – 39, 40 – 49, 50 & over

Pre-registration: \$15.00 with a T-shirt or \$8.00 without a T-shirt. Entries must be postmarked by August 10, 2010. No refunds.

Race day registration: \$10.00 – a limited number of T-shirts will be available for an additional charge

1 Mile Fun Walk – A 1 mile course routed through the streets of Ottawa. The course will start and finish in the P.T. Services parking lot. A separate door prize drawing will be held at the awards ceremony.

Pre-registration: Individual: \$2.00 or Family: \$5.00. T-shirts can be ordered for an additional \$7.00 each. Entries must be postmarked by August 10, 2010. No refunds.

Race day registration: Individual: \$3.00 or Family: \$7.00 – a limited number of T-shirts will be available for an additional charge.

******PRE-REGISTRATION ENTRIES MUST BE RECEIVED BY AUGUST 10, 2010******

Race day registration is from 8:00 am to 8:45 am at P.T. Services

**Mail completed form and check to: P.T. Services c/o Angie Yaeger,
1331 E 4th St. Ottawa, Ohio 45875**

For information call 419-523-9337 or email ayaeger@ptsrehab.com

Register online at active.com

Name: _____

5K

1 mile

Age: _____

Address: _____

T-Shirt: Y or N

City, State, Zip: _____
XXL

T-shirt size (Adult): S M L XL

Phone #: _____

In consideration of the acceptance of my entry, I for myself, my executors, and my assignees, do hereby release P.T. Services, race officials, sponsors, and volunteers from all claims to damages, demands, actions, whatsoever in any manner arising or growing out of my participation in said event. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in this event. I also give permission for First Aid. I authorize the use of my name and/or photo taken at this race for use in any news media or any form of publicity.

Signature _____

Date _____