

2012 Run For Divas

The Diva Dash 5K & Family Walk

Formally the Stargazer Run

Awards will be given to those who wear their BEST Diva Attire!

Official Registration Form

or www.active.com

Saturday, March 31, 2012

5K Run at 8:00 a.m. / 1 mile fun run at 9:00 a.m.

South Baldwin Regional Medical Center back parking lot, Foley AL

1613 North McKenzie Street, Foley, AL

MEN WELCOME!

Proceeds to Benefit: The SBRMC Deserving Diva Medical Fund: The Deserving Diva Fund is designed to help women financially receive medical attention. The Deserving Diva Fund is administered through Ecumenical Ministries of Foley.

Registration: Pre-registration postmarked by 03/24/12. Race Day registration 6:30 a.m.—7:30 a.m. (See fees below for Entry Form)

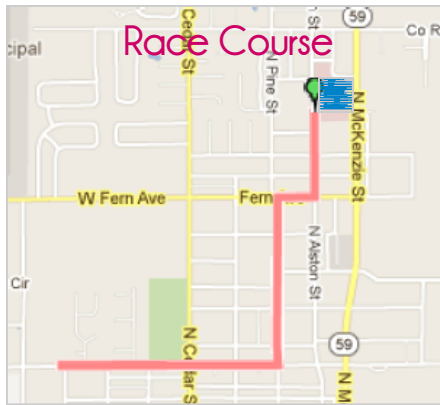
Post Race Party: FOOD! FUN! BOAS! Immediately following the race.

Awards: Award Presentation (South Baldwin Regional Medical Center back parking lot) at 10:00 a.m. Overall Male & Female • Master Male & Female (40-49) • Grandmaster Male & Female (50-59) • Senior Grandmaster Male and Female (60+) • Wheelchair • Racewalk Male & Female • Fun Run Male & Female • Top Three Finishers in Each Age Group

T-Shirts to all registered participants

Race Packets: May be picked up from 6:30 a.m.—7:30 a.m. on race day

Age Groups: 10 and under,
11-14, 15-18, 19-24, 25-29,
30-34, 35-39, 40-44, 45-49,
50-54, 55-59, 60-64, 65-69,
70-74, 75-79, 80-84, 85 and
over



Mail to: Marketing Department
South Baldwin Regional Medical Center
1613 North McKenzie Street
Foley, AL 36535

Please make checks payable to South Baldwin Regional Medical Center

OFFICIAL ENTRY FORM

Healthy Woman—Diva Dash 5K & Family Walk

T-Shirt Size

S M L XL XXL Youth S Youth M Youth L

Fees: Please Check One:

5K Run

\$20.00 (pre-registration) \$25.00 (Day of Race)

One Mile Fun Run

\$15.00 (pre-registration) \$20.00 (Day of Race)

5K Race Walk

\$20.00 (pre-registration) \$25.00 (Day of Race)

Children One Mile Fun Run ages 12 and under

\$12.00 (pre-registration) \$15.00 (Day of Race) 5 and under free (able to purchase a t-shirt for \$10.00)

Name: _____

Age: _____ M/F: _____

Address: _____

City: _____ St. _____ Zip: _____

Phone: _____

Email: _____

In consideration of your accepting my entry, I, intending to be legally bound for myself, do hereby release and discharge the State of Alabama, City of Foley, South Baldwin Regional Medical Center, Community Health Systems and any, and all sponsors, for any liability arising from illness, injuries I may suffer due to this event.

Date: _____ Signature: _____ Parent/Guardian must sign if applicant is under 18 years old.