



5K AND MEMORY WALK

SATURDAY, JUNE 20, 2020

8:30 AM | ROSSMOYNE BUSINESS CENTER
(5000 RITTER ROAD, MECHANICSBURG)

Whether you are a serious runner, or participate to commemorate the memory of a loved one, ALL are welcome! Join us individually or with a team.



THE 5K is a measured five kilometers (3.1 miles), relatively flat course located at the Rossmoyne Business Center.

AWARDS: Medals and \$100 will be presented to the 5K Overall Male and Overall Female Champions. Ribbons will be presented to the top three Male and Female finishers in eight age brackets.

THE MEMORY WALK is a shorter distance along a portion of the same course.

ON SATURDAY, OCTOBER 3:

- Plenty of free parking
- 7:15 to 8:15 AM – Registration
- 8:30 AM – Start time

POST RACE/WALK ACTIVITIES

After the run/walk, we celebrate the lives of those you ran or walked in memory of with refreshments ... responsibly, of course. Plus, besides the prizes for winning runners, there will be additional fun awards for everyone: largest team, most adorable dog, and best decorated baby stroller.

REGISTRATION IS REQUIRED! Complete and mail the form (below), and if enclosing a donation, please make it payable to Homeland Hospice.

Homeland Hospice, Development Office
2300 Vartan Way, Suite 270
Harrisburg, PA 17110

All entries postmarked by September 21, 2020, are an optional donation of \$25 and guarantees a FREE t-shirt. Entries postmarked after September 21 (including the day of the event) are an optional donation, and t-shirts are available while they last. Online registration is also available.

Help us raise additional funds! Collect \$100 or more in sponsorships and receive a special goodie bag. Sponsorship forms are available at homelandhospice.org/5K-memorywalk. Bring your completed form on the day of the event, along with all monies/checks (payable to Homeland Hospice).

QUESTIONS? Contact Myra Badorf at mbadorf@homelandhospice.org or call 717-221-7890.



HOSPICE

2300 Vartan Way • Harrisburg, PA 17110 • 717-221-7890 • HomelandHospice.org

Yes! Register me for the 2020 HOMELAND HOSPICE 5K and Memory Walk.

Please complete and mail this form (address above), and if enclosing a donation, please make it payable to Homeland Hospice.

Name _____ Address _____
(Please print.)

Phone _____ City _____ State _____ Zip _____

E-mail address _____ Age (on Race Day) _____ Male _____ Female _____

- I am pleased to be participating, and I'd like to make a donation in the amount of \$ _____.
- Yes, I'd like to honor a loved one with his or her name on this year's t-shirt for a \$25.00 donation. Please print name as you would like it to appear _____
- I cannot participate but I'd like to make a donation in the amount of \$ _____.

5K T-shirt size *(circle one)*

Youth: S M L

Adult: S M L XL XXL

WAIVER/RELEASE: I hereby waive all claims against the race director, race officials and volunteers, any and all sponsors including, but not limited to Homeland Hospice, Homeland Center, the City of Harrisburg, the County of Dauphin, and all its representatives and successors from any injury or liability I might suffer in this event. I attest that I am physically fit and prepared for this event. I assume all risks associated with running in this event including, but not limited to: falls; contact with other participants; the effects of the weather, including high heat and/or humidity; and the condition of the road; all such risks being known and appreciated by me. I grant full permission for organizers to use my name and/or pictures in legitimate accounts and promotions of this event.

Signature _____ Date _____
(Parent or guardian's signature if less than 18 years of age.)