

# Sheridan Community Hospital

## Springfest 5K Run/Walk

**Date: May 27, 2017**

**Starting Time: 9:00 AM**

**Registration Time: 7:30—8:45AM**

**Pre-Register by: May 15, 2016 to Ensure T-shirt**

Sign up by mail or online at:

[runsignup.com/Race/MI/Sheridan/Springfest5k](http://runsignup.com/Race/MI/Sheridan/Springfest5k)

### Entry Fees:

- \$15.00 by May 15
- \$20.00 after May 15

### Location:

Sheridan Community Center  
205 St. Clair St.  
Sheridan, MI. 48884

### Contact:

Phone: 989.291.6234

Email: [speabody@sheridanhospital.com](mailto:speabody@sheridanhospital.com)

# Sheridan

## Community Hospital

Homelike, personal care

### Age Brackets:

14 and under, 15-18, 19-24, 25-29, 30-34, 35-39,  
40-44, 45-49, 50-54, 55-59, 60-64, 65-69, over 70

### Awards:

Top 3 in each age bracket—Medals

Top overall men & women— Plaque

Top masters (over 40) men & women— Plaque



### Mail form and entry fee to:

Sheridan Community Hospital

ATTN Steve Peabody

301 N Main St

Sheridan MI 48884

Make checks payable to :

Sheridan Community Hospital

Memo: 5K

Name: \_\_\_\_\_

Street Address (Including Apartment)  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number  
\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Age on Race Day \_\_\_\_\_

Male  Female

Runner  Walker

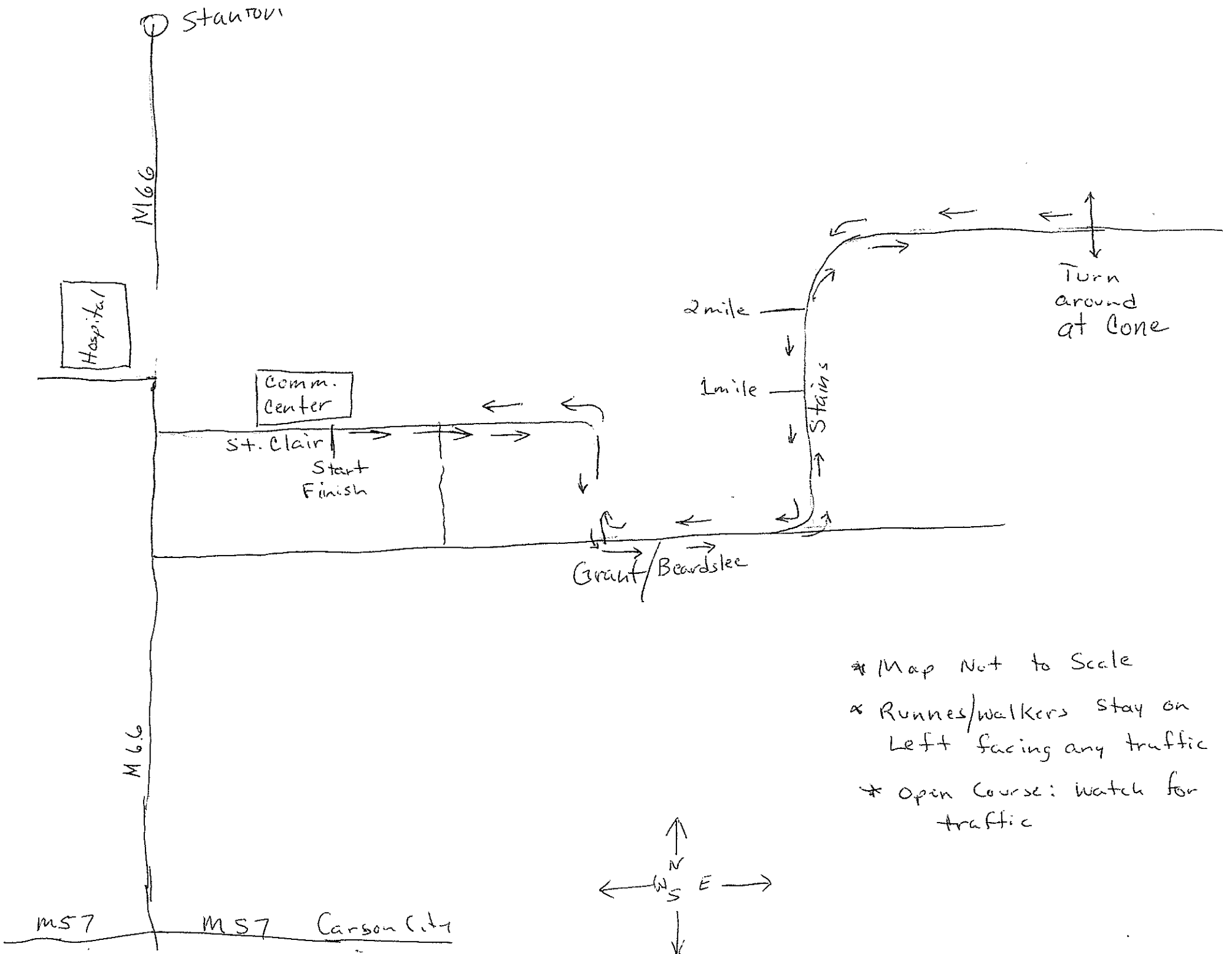
Shirt Size:  S  M

L  XL  XXL

I know that running a road race is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decisions of a race official to my ability to safely complete the run/walk. I assume all risks associated with this event including, but not limited to falls, contact with other participants, the effects of the weather, traffic, and condition of the road. All such being known and appreciated by me. Having read the waiver I for myself and anyone entitled to act on my behalf, wave and release Sheridan Community Hospital and The City of Sheridan from all claims liabilities of any kind arising out of my participation in this event.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT IF UNDER 18 YEARS OF AGE \_\_\_\_\_



- \* Map Not to Scale
- \* Runners/walkers stay on Left facing any traffic
- \* Open Course: watch for traffic

