

New Year's Day 5K

for the American Cancer Society in Memory of Denise Suits

January 1, 2017 @ 11:00am

SENTARA®

Center for Health & Fitness

NEW YEAR'S DAY
1.1.17



In memory of Denise Suits to benefit The American Cancer Society

Register Online!

<https://raceroster.com/>

[events/2017/10420/new-years-day-5k](https://raceroster.com/events/2017/10420/new-years-day-5k)

service fee applies

Start and End:

Sentara Center for Health and Fitness
4001 Coliseum Dr. Hampton

Fee: \$20 prior to December 23

\$25 after December 23

\$15 without Race Shirt, \$20 after Dec. 23

Packet Pick-Up:

December 31, 11am-2pm and

Race Day, 9-10:45am at

Sentara Center for Health and Fitness

Contact/Send payment to:

Carla Smith

5K-Sentara Center for Health & Fitness
4001 Coliseum Dr. Hampton, VA 23666

www.sentarafitness.com

757-766-2658

csmith@sentarafitness.com

Make Checks Payable: American Cancer Society



Last Name _____

First Name _____

Address _____

City _____ State _____ Zip _____

Age on Race Day _____ Date of Birth _____

Male or Female T-Shirt: S M L XL XXL

PTC MEMBER: Yes or No (sorry, no PTC passes accepted)

Phone _____

E-Mail _____

Event Fee: \$20 before Dec. 23, \$25 after (\$15 if not requesting shirt) \$ _____

Additional Donation to American Cancer Society: \$ _____

Total Payable to American Cancer Society: \$ _____

Funds will be donated to the American Cancer Society and the Cancer Fitness programs subsidy fund

Under 18: This is to certify that my son/daughter has my permission to compete in the Sentara 5K Fun Run benefitting the American Cancer Society and that race officials have permission to authorize emergency treatment.

Parent/Guardian Signature: _____ Date: _____

WAIVER: I hereby release Sentara Health Care, Sentara Center for Health & Fitness, CarePlex West Wellness Operations, LLC, Hammes Company, Peninsula Track Club, Road Runners Club of America, City of Hampton, all sponsors and contributors, all race staff and officials from any injuries or damages I may receive while participating in the fun run or activities associated with the event. I am in good physical condition and I am able to compete in any of the events for which I am registered. In addition, I grant permission for use of any photograph taken, motion pictures, recordings, or any other record of this event for any legitimate purpose. I certify that the information provided is true and complete and agree to comply with the conditions of this event.

Participant Signature: _____

Date: _____