

Emerald Miles 2012 Registration Form

Must be postmarked by 3/5/12 for pre-registration

First Name: _____

Last Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Age on race day: _____ Gender: M ___ F ___

Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

How did you hear about the race?

Team Name (if applicable): _____

Category:

5K Run 5K Walk

I am not able to run/walk but would like to donate!

♣ Please credit _____
(participant or team) for my donation. (if applicable)

Payment enclosed:

\$30 Adult Pre-Registration (13 and over)

\$15 Child Registration (12 and under)

Circle T-shirt Size: Youth S M L

Adult S M L XL XXL

I would like to receive a green long sleeve event shirt instead of the standard gray event shirt.

I have signed the waiver on the back of this form

Mail payment and completed registration form to the Epilepsy Foundation (address on reverse)

Additional Event Sponsors:

Berry Company

Costco

Fleet Feet Sports

Green BEAN Delivery

Franz CPAs, Inc.

Marx Bagels



Epilepsy Foundation of
Greater Cincinnati

895 Central Ave., Suite 550
Cincinnati, OH 45202

Phone: 513-721-2905/877-804-2241

Fax: 513-721-0799

E-mail: efgc@cincinnati-epilepsy.org



Presents...



EMERALD MILES
RUN/WALK 5K

MARCH 10, 2012

IN LOVING MEMORY OF DENNIS STEMLER

March 10, 2012

9:00 am

Newport on the Levee

1 Levee Way Newport, KY 41071



Epilepsy Foundation of
Greater Cincinnati

Emerald Miles 5K Run/Walk 2012

Your participation in this event helps the Epilepsy Foundation provide valuable services to our community including: counseling, support groups, community education, group homes, Camp Flame Catcher for youth with epilepsy, an Adult Day Activity Program and much more! To find out more about the unique services the Epilepsy Foundation provides, visit: www.cincinnatiepilepsy.org



Support people with epilepsy by either running or walking the 5K scenic course that starts at Newport on the Levee, crosses over the Ohio River, loops through Sawyer Point into Cincinnati and then returns to the Levee.



Numerous awards will be handed out including:

- ♣ Trophies to the first male and female runners and walkers
- ♣ Medals to the first and second place finishers in each age division:
 - ♣ Runner's Divisions: 14 and under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-69, 70 and over.
 - ♣ Walker's Divisions: 19 and under, 20-29, 30-39, 40-49, 50-59, 60-69, 70 and over.
- ♣ Awards to the best St. Patty's Day dressed child (under 18) and adult!



Bonus!

If you have 20 or more individuals on your team who are all registered and paid 3 weeks prior to the event, notify us and we can have your team name put on the sleeve of the event shirt!

Registration information:

Fees:

- ♣ Adults (13 and over) Pre-registration is \$30 (includes an event shirt*); Same day registration is \$30 for the race only or \$35 with an event shirt, while supplies last.
- ♣ Children (12 and under) are \$15 (includes an event shirt*)

Children in strollers are free, but do not receive event shirt or awards

To pre-register, your registration form must be **post-marked** by 3/5/12, completed on-line by noon on 3/7/12, or done in person at Fleet Feet Sports early number pick up on 3/8/12. (See below for early pick up details.)

All pre-registration event shirts must be picked up by 9:00 am on race day or they will be forfeited



The race starts at 9:00 am; same day registration is from 7:30 am - 8:30 am



New!! Show your support for people with epilepsy by choosing a green long sleeve event shirt to wear at the race in place of the standard gray shirt and be noticed!



Refreshments will be available after the race



Beat the crowd the day of the event and pick up your event shirt and race number at Fleet Feet Sports (9525 Kenwood Rd., Cincinnati, OH 45242) on March 8 from 5:00 pm to 8:00 pm



Questions? Call the Epilepsy Foundation at 513-721-2905

To pay by:

♣ Check: Mail registration form and check to:
Epilepsy Foundation of Greater Cincinnati
895 Central Ave., Suite 550
Cincinnati, OH 45202

♣ Credit Card: Mail registration form with your credit card information to the address above:

MasterCard Visa American Express

Card # _____

Expiration Date: _____ Security Code: _____

Amount: _____

Signature: _____

♣ To register on-line, go to:
www.cincinnatiepilepsy.org and follow the Emerald Miles link.

*By mailing check and registration form, a service fee will not apply.



WAIVER: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in the Emerald Miles run/walk, and do hereby release the Epilepsy Foundation of Greater Cincinnati, Steve Prescott, all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all the rules of participation, and acknowledge that the Race Committee may refuse or return my entry at its discretion. I understand the risks for such a run, and have trained adequately in preparation for the run. I HAVE NOTED ANY MEDICAL CONDITION on this entry form next to my signature. I will permit the use of my name and picture participating in this event for publicity.

Signature

Parent Signature (if under 18)