## 8TH ANNUAL



## For the first time this year - CHIP TIMING!

Saturday, October 21st 2017

Centennial Park, 10000 Route 108, Ellicott City, MD.

<u>Register or Donate on-line: (http://getmeregistered.com/Myositis5K)</u> or scan the QR code below! NOTE: Early registration insures receipt of a T-Shirt.



All Proceeds go to the Johns Hopkins Myositis Center and The Myositis Association - in search for a cure for this rare disease.



8:00 Registration and Packet Pick-up

8:45 Welcome and Warm Up Activity

9:00 5K Run followed by walkers and "rollers"

1000 Awards Ceremony

1100 Activities finish

Registration Fees:\*

Adults \$30.00 (\$35 after Oct 10<sup>th</sup>)

Under 13 \$15.00

(Register by Oct 1st to insure T-shirt size )







<u>Also available:</u> Free massage therapy demos, silent auction, specialty information tables, Instructor-led warm up exercises, 50/50 drawing.

<u>Please Help</u>: Myositis is a rare, life-altering autoimmune disease that can cause muscle damage, pain, fatigue, weakness, and death. For many who suffer from the illness, it is a challenge to stand up, get out of bed, walk, or to perform other simple day to day activities. Some forms of the disease may also damage the skin and attack major organs of the body. For More Information please contact: Bitsy Anderson at <u>terrybitsy@verizon.net</u> or 410-987-8407.



## RACE ENTRY FORM <u>PLEASE PRINT LEGIBLY</u> For all Registrants at the same address.

Name				Sex:		Birth Date		
Name Shirt Size (Circle One): ADULT: S	SM	M	L	1X	2X.	YOUTH: S	M	L
Name				Sex:		Birth Date		
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Name				Sex:		Birth Date		
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NameShirt Size (Circle One): ADULT: S				Sex:		Birth Date		
Shirt Size (Circle One): ADULT: S	SM	M	L	1X	2X.	YOUTH: S	M	L
Address:								
City, State Zip								
Phone E-ma	il:							
Please make Checks payable to: The Myos and mail to: Myositis RWR, 355 Hawick C				`		•	s Wall	κ")
Waiver and Release. I, the undersigned, agreed Association (TMA) and Howard County, Mary employees and authorized volunteers from all child's participation in the Myositis 5K Run, We Maryland, on Saturday, October 21st, 2017, to Hopkins Myositis Center. I do hereby waive a or property, which may be caused by any act agents or employees and Howard county, Matemployees and authorized volunteers arising in this event, and I hereby assume liability for Important – participants under age 18 must here	land, I costs /alk N o bene Il clair of fail ryland direct any l	its el s, exp ' Roll efit TI ms fo ure to ure to tly or oss,	ected bense held or dar o act lecte indir dama	d and a e and I at Ce yositis mage o , by Thed and ectly fi age or	appoint liability ntennia Assoc or loss ne Myo appoir om my other I	ted officials, of arising out of al Park in Ellic iation and the to me or my o sitis Associati nted officials, o or my child's iability from su	ficers my or ott Cit Johns hild's on, its officers particuch ev	my y, person officers, s, eipation
Name and Signature of parent or legal guardian.								
Name			Sig	nature				