

RACE DAY SATURDAY, SEPT. 24

- 8:30 a.m. Registration
- 10:00 a.m. 5K Run start
- 10:05 a.m. 5K Walk start
- 10:45 a.m. Kids One Mile Fitness Run
- 11:10 a.m. Kids Quarter Mile Indoor Fitness Fun Run

LATE REGISTRATION & PACKET PICK-UP

Friday, Sept. 23, at Genesys Athletic Club
12 noon - 6 p.m.

FEES

- \$20 early registration (by 9/9/11) with T-shirt
- \$15 early registration (by 9/9/11) without T-shirt
- \$25 late registration (after 9/9/11) with T-shirt
- \$20 late registration (after 9/9/11) without T-shirt
- \$10 Kids Races (early or late) with T-shirt

AWARDS

Awards to overall and first Masters Male and Female finishers, top three finishers in each division.

AGE GROUPS: MALE & FEMALE: 12 & under, 13-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75 & over.

KIDS RACES

All participants receive a finishers award. Not timed. Parents may accompany kids.

RESULTS

Race will be scored and posted race day. Results will also be posted on www.gaultracemanagement.com and www.genesysathleticclub.com



Saturday, Sept. 24, 2011

Your participation in Dash for a Difference will benefit the patients and families of Genesys Hospice. Proceeds will support the mission of Genesys Hospice in providing quality, comprehensive care and support to those with a terminal illness and comfort for their families.

COURSE DESCRIPTION

The course for Dash for a Difference is on the grounds of Genesys Health Park, with a timed start and finish. The course winds through Health Park's 478 acres with much of the course on the paved nature trails, where natural wetlands abound with nature's wild flora.

ON RACE DAY

- Genesys Athletic Club is located at 801 Health Park Blvd. in Grand Blanc; exit 108 off I-75.
- No locker room facilities are available. Please come dressed to run or walk.
- Please park across Pollock Road or in the medical center public lot.
- Child care is available for ages 2 - 10. Call (810) 606-7534 for reservations/fee information.

INFORMATION

For information about Dash for a Difference, please contact Genesys Athletic Club at (810) 606-7300 or Genesys Health Foundation at (810) 606-7909.

CUT ALONG THIS LINE

2011 REGISTRATION FORM

PLEASE COPY IF NEEDED

PLEASE PRINT

LAST NAME

[Grid of 20 boxes for last name]

FIRST NAME

[Grid of 10 boxes for first name]

M.I.

[1 box for middle initial]

STREET ADDRESS

[Grid of 20 boxes for street address]

CITY/TOWN

[Grid of 15 boxes for city/town]

STATE

[2 boxes for state]

ZIP CODE

[5 boxes for zip code]

PHONE NUMBER

[3 boxes] - [3 boxes] - [4 boxes]

DATE OF BIRTH

[2 boxes] / [2 boxes] / [4 boxes]

AGE ON RACE DAY

[2 boxes]

ADULT SHIRT SIZE: S M L XL XXL

KIDS SHIRT SIZE: S M L

SEX: M F

EVENT: 5K RUN 5K WALK KIDS RACES

TIMING DEVICES WILL BE PROVIDED TO PARTICIPANTS

I own my ChampionChip, my chip number is: _____

SEND ENTRIES TO:

Genesys Health Foundation

One Genesys Parkway

Grand Blanc, MI 48439

or register online at www.genesysathleticclub.com or www.active.com

PAYMENT

My credit card number is: _____/_____/_____/_____ Exp Date: ____/____/____ Security Code _____

Make checks payable to Genesys Health Foundation

ATHLETE (OR PARENT, IF UNDER 18) MUST SIGN: _____ **DATE:** _____



Total Entry Fee	\$ _____
Hospice Donation (May be Tax Deductible)	\$ _____
Total Enclosed	\$ _____

In consideration of my participation in this event, I for myself, my heirs, executors, and administrators, waive all rights and claims for damages I may have against Genesys Health System, the sponsors of this event, their agents, representatives, successors, and assignees for any and all injuries suffered by me at said event, or which arise out of my traveling to, participating in, and returning from this event. I further state that I am in proper physical condition to compete in this event.