



- ✓ Register online at: [www.active.com](http://www.active.com)
- ✓ 5k Run/Walk
- ✓ GREAT FAMILY EVENT!
- ✓ Post-Race food and festivities
- ✓ Kids Race after the 5k
- ✓ Lots of Awards and Prizes!
- ✓ Free gift to first 100 to arrive

Sponsored by **WeymouthMRI**

**Time:** 10 am, September 4, 2006

**Location:** The Marshfield Hills General Store, Old Main Street, Marshfield Hills, MA

**Distance:** 5k/3.1 miles (walkers welcome); Short children's races by age group

**Entry Fee:** Pre-registration - \$20 + free tee (\$50 max per family – must be pre registered)  
 Race Day Registration - \$20 (tee = additional \$5)  
 Ages <7 or >80 – FREE  
 Free gift for first 100 to arrive on race day

**Tee-Shirts:** Free for pre-registered runners (may not have shirts for race day registrants)

**Age Groups:** 0-13, 14-19, 20-39, 40-49, 50-59, 60+, and walkers

**Awards:** Top three in each age group

**Contact:** Dave Will for more information – 781 985 9455 daverwill@yahoo.com

**Sponsors:** Our Primary Sponsor is: **Weymouth MRI Medical Imaging**  
 Other sponsors include: New Balance, Balance Bar, Franklin Sports, On-The-Path Wellness, Quizno's, Dick's Sporting Goods, Black Rock, Marshfield Hills General Store, Hokanson Insurance, Roche Bros., Red Bull, Reebok.

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Name: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Please circle:  
Male / Female

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Please circle:  
Runner / Walker

	<u>Price</u>
Race Registration	\$20 (\$50 max per family – must pre-register)
Tee Shirt (please indicate sizes)	Free to pre-registered runners
Additional donation for MHCA	\$ _____
Total amount enclosed	\$ _____

In consideration of this application being accepted, I hereby for myself, my heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against the organization or organizations holding this event, its agents, representatives, successors and assigns for any and all injuries suffered at this event or while traveling to or returning therefrom.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (parent or guardian if under 18)

Please make donations and checks payable to M.H.C.A. **Please enclose registration fee and donations** and mail to:  
 M.H.C.A., P. O. Box 264, Marshfield Hills, MA 02051 - **OR REGISTER ONLINE: [www.active.com](http://www.active.com)**