



Clinic for Special Children

2020 VIRTUAL 5K

\*Event will not be held on-site this year\*

REGISTRATION FORM

Virtual Event | SEPTEMBER 19th – 26th, 2020

All proceeds will support the mission of the Clinic for Special Children, a medical home for children and adults living with rare genetic disease.

Runners, joggers, and walkers are invited to participate in the 2020 Clinic for Special Children Virtual 5k! After careful consideration and due to COVID-19 public health safety guidelines, this year's race has been moved to a virtual format. Between Saturday, September 19th and Saturday, September 26th, runners, joggers, and walkers can complete a 5k route of their choice in support of the Clinic for Special Children. Your participation in our virtual 5k race this year will help us bring in vital fundraising to support our mission during this unprecedented time.

VIRTUALLY ANYWHERE | Make your own course! Run, jog, or walk a 3.1-mile course of your making to participate in our virtual 5k.

WHEN | Complete your 5k between Saturday, September 19th and Saturday, September 26th – you can run, jog, or walk at any time that week to participate. Registration will close on Saturday, September 26th.

VIRTUAL 5K DONATION | This year's virtual 5k has a suggested donation of \$25. Feel free to donate more or less, we're grateful for your support this year! Online registration is also available at ClinicforSpecialChildren.org/events/5k

A note: this year's registration will not include a t-shirt or goody bag due to the virtual nature of this race.

If paying via check, make payable to Clinic for Special Children.

Mail registration form & payment to: Clinic for Special Children, Attn: Kelly Cullen, PO Box 128, Strasburg, PA 17579

SUBMISSION OF TIME AND PHOTOS | Send us your time and/or photos of you participating in the #2020CSCVirtual5k! You can post your time and/or photos using the hashtag on social, email us at queries@clinicforspecialchildren.org, mail them to us (535 Bunker Hill Rd, Strasburg, PA 17579), or submit them via the online form on our website. We will be posting submitted photos and times on our website (ClinicforSpecialChildren.org) and on our social pages.

FUNDRAISING FOR CSC | Fundraise with family & friends in support of the Clinic for Special Children! We will be announcing details on how to fundraise online for the race soon. Awards will be given to top fundraising individuals and teams!

PRIZES | We will be giving out prizes to top fundraisers, random prizes to registered participants, and more! Details to follow.

QUESTIONS | Contact Kelly Cullen at kcullen@clinicforspecialchildren.org, call 717-687-9407, or visit ClinicforSpecialChildren.org/events/5k.

No refunds. Race results and photos will be posted on ClinicforSpecialChildren.org.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Team (see Fundraising above): \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender (circle one): Male Female

Waiver and Release: Please read prior to signing.

In consideration of being permitted to participate in Clinic for Special Children's 5K, I agree to assume all risks inherent in participation in such an event, whether they are apparent to me or not. I certify that I am in good physical health and fit to participate. Nevertheless, I acknowledge that participation carries an inherent risk of injury to my person and damage to my property. I hereby waive and release, for myself and for my heirs and assigns, any and all claims, causes of action, or liabilities which may hereafter accrue against Clinic for Special Children, employees, volunteers, officers, directors, successors and any and all sponsors, their representatives and successors, that may arise as a result of my participation in Clinic for Special Children's 5k, including any and all claims for personal injuries caused by CSC's negligence. I grant permission to use photos of me and release my name for any and all event purposes. All of the foregoing has been read by the undersigned and voluntarily been signed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CSC STAFF: PAYMENT: CASH CC CHECK (# )