11th Annual
Mad Hatters & Munchkins
5K & Family Festival
Saturday, April 28, 2018
7:00am
Boundary Waters Park

Registration: 7:00a.m.

Start Time: 8:30 a.m. (1-mile Fun Run/Walk) 9:00 a.m. (for 5K Run/Walk)

Location: Boundary Waters Park, Douglasville, Georgia

Directions: FROM I-20, Take Fairburn Rd (Hwy 92) south, at intersection of Hwy 166 & Hwy 92 - Turn Right, Park is on the left (approx. 1-1/2 miles) just before the Chattahoochee River. FROM HWY 166, Take Hwy 166 east, at intersection of Hwy 92 - Turn Left, Park is approx. 1/2 mile on right. Follow the signs for parking.

Course: Boundary Waters Park's cross country course is made up of mostly trails including, surfaces packed with dirt and mulch, flat grassy areas, gently rolling hills, and bridges.

Proceeds: S.H.A.R.E. House –SHARE House Douglas is a non-profit organization providing crisis intervention and the continuum of care to address the causes and effects of family violence. For more information go to: www.sharehousedouglas.org

Race Information: Deborah Foreman 770-949-06 dforeman@sharehousedouglas.org

Registration: **Online at** www.active.com (Search Mad Hatter) or with PayPal www.sharehousedouglas.org

Mail-in registration must be received by April 15, 2018: S.H.A.R.E House P.O. Box 723 Douglasville, GA 30133

Entry fee is Non Refundable **T-shirts will not be mailed** *Race Day registration begins at 7:00 a.m.

Pre-Registration by 4/15 $35 **Registration 4/16 until Race Day $40** **Children 10 and Under $25** **Phantom Runner $30** **Student $25**

……**REGISTRATION FORM**……

STUDENT ATHLETE **SCHOOL NAME:_____GRADE:_____**

Complete form and Return to: P.O. Box 723, Douglasville, GA 30133

Include a check made payable to "SHARE House" **STUDENT FEE $25**

Pre-Registration by 4/15 $35 **Registration 4/16 until Race Day $40** **Children 10 and Underm$25** **Phantom Runner $30**

1 MILE FUN RUN _____ 5K RUN/WALK _____

Last Name _____ First Name_____

Address _____ City_____ State_____ Zip_____ Phone_____
Email_____

Gender (circle): Male Female Age on Race Day _____ Date of Birth_____

T-Shirt Size (circle) Adult – S M L XL XXL Youth – YS YM YL

ATHLETE'S RELEASE: PLEASE READ. YOU MUST SIGN & DATE TO PARTICIPATE:

I knowing and at my own risk, and in consideration of my acceptance as a participant, hereby forever waive and release any and all claims for injuries or illness that I may incur as a direct or indirect result of my participation in this race, against S.H.A.R.E. House, Douglas County, Douglas County Parks and Recreation, sponsors, or any other group or individual assisting or associated with this race. None of the above is responsible for the loss of any personal item(s). I understand and accept my own liability for my safety and health during the Running Away the Pain Event. Parent/guardian/participant also authorizes and consents to the use of the participant's name and/or picture in television, newsprint, advertisement or other media.

_____ _____ _____

Signature Parent's Signature (under 18) Date