

## 10th Annual Hope 4 You Breast Cancer 5K Run and 1 Mile Walk Saturday, June 3rd, 2017 at Missouri Southern State University, Joplin, Missouri 3950 East Newman Road, Just North of Hughes Stadium

### **Volunteer Registration Form**

Proceeds from RACE4HOPE Race/Walk will benefit Hope 4 You Breast Cancer Foundation, an organization with the mission of working with the local area to raise awareness, provide support, offer education and instill HOPE for those afflicted with and affected by Breast Cancer.

#### **RACE DAY SCHEDULE:**

6:30 AM – Registration 7:45 AM – Survivor Ceremony 8:00 AM – Race 4 Hope 9:00 AM – Awards and Presentations

#### Early Check-in /T-Shirt Pickup:

Friday, June 2nd, 3 - 6 pm The Runaround, 422 S. Main Joplin, MO

#### LOCATION:

MSSU Tom Rutledge Cross Country Course, 3950 E. Newman Rd, Just North of Hughes Football Stadium Rain or Shine!

FOR ADDITIONAL RACE INFORMATION INCLUDING EARLY PACKET PICK-UP, PLEASE VISIT WWW.HOPE4YOUBCF.ORG

# Hope 4 You 5K Run/Walk Volunteer

LAST NAME FIRST NAME				In consideration of your accepting this volunteer form, I the undersigned, intending to be legally bound for myself, my heirs, executors and administrators, waive and	
Address				release any and all rights and claims for damages I may have against the Hope You Breast Cancer Foundation, MSSU, and the officials and sponsors of the Race	
Сіту	STATE		ZIP	Hope. I acknowledge that I am aware of the inherent risks of participation in a athletic event of this type. I attest and verify that I am physically fit and have sufficiently trained for this event. Further, I grant full permission to the Hope 4 You Breast Cancer Foundation to use photographs, videotapes, motion pictures are recordings of me, or any other record of this event for any legitimate purpose.	
PHONE	E-MAIL				
DATE OF BIRTH (MM/DD/YY)	AGE	SEX: M/F		recordings of the, of any other reco	ord or this event for any legitimate purpose.
T-SHIRT SIZE (COMPLIMENTARY)				SIGNATURE	DATE
L XS	∐s L	Јм Шт Шх	L yyı	(If under 18, you must have a Parent or Guardian Sign)	
	0	W L X	_ /VL		to Kris Drake, Race4Hope Volunteer Coordinator, a
VOLUNTEER ASSIGNMENTS (PLEASE CHECK WHERE YOU PREFER TO HELP)				417-347-9328 emailed to <a href="mailto:mcdrake@freemanhealth.com">mcdrake@freemanhealth.com</a> or mailed to her attention at:  **RACE 4 HOPE / VOLUNTEER**	
Packet Pick up/T-Shirt Distribution 3 – 6 pm Friday June 3					HOPE 4 YOU BCF
Registration at Packet Pick up 3 – 6 pm Friday June 3					P.O. BOX 816
Race Day Assignments Saturday June 4				Hope 4 You*	JOPLIN, MO 64802
Food Pick up / Refreshment Set up 6 am				Breast Cancer Foundation	POSTMARK BY MAY 27, 2016
Set up Tables Decorations 6					
Day of Registration 6 am	· uiii				
Day of Packet Pick up 6 am					
Course Check Points 7 am					
☐ Award Set up & Ceremony 7 a	am				