

# POCAHONTAS WALK/RUN AGAINST Congenital Heart Defects

June 25<sup>th</sup>, 2011 @ Pocahontas Hospital  
3:00pm-3:50pm Registration  
4:00pm: 5K Begins  
4:10pm: 1 mile fun walk begins  
(No medals will be awarded for 1 mile fun walk)  
(Note time change from the previous years)

Entry Fees: \$25.00 IF postmarked by June 13th  
\$30.00 registration fee after June 13th

Please mail completed entry forms to:

Pocahontas Walk/Run  
C/o Amanda Allen  
606 NW 7<sup>th</sup> St

Pocahontas, Iowa 50574

Any questions please call Amanda Allen @ 712-358-3244

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Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_  
Shirt Size S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL (+\$1.00) \_\_\_\_\_  
Address \_\_\_\_\_ 5K \_\_\_\_\_ 1 mile \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_

**THE BEST PLACE  
TO FIND THE RACE**  
RunningWall.com

Please make checks payable to:  
**Pocahontas Healthcare Foundation**

**NO REFUNDS.** Shirts not guaranteed to be available on day of race for late registrants.

Release of Liability: The undersigned hereby expressly accepts responsibility for participation in the Pocahontas Walk/Run Against CHD on June 25<sup>th</sup>, 2011. The undersigned acknowledges that the race is voluntary and that I am voluntarily participating. It is further acknowledged that said participation is not on behalf of Pocahontas County, the city of Pocahontas, their agencies, employees, agents, and representatives, sponsors, race officials or volunteers. The undersigned hereby releases all liabilities whatsoever, including all claims, demands and cause of action of every nature affecting the undersigned, which may have or ever claim to have in connection with the Pocahontas Walk/Run Against CHD. The undersigned agrees that the above mentioned parties shall be held harmless in the event of accident or incident causing damage or loss of property or injury to the undersigned. I HAVE READ THE FOREGOING RELEASE, UNDERSTANDING ITS TERMS AND FREELY AND VOLUNTARILY SIGN THE SAME.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature of parent if you are under 18 years of age)