

Mike Gillen Memorial 5k

Saturday, August 8th, 2015

Registration: 8:00 AM

5k: 9:00 AM/ 1 Mile Walk Follows

Morenci Bible Fellowship

13143 Sims Hwy

Morenci, MI 49256

5K Run & Walk Before 7/25/15 - \$15.00

After 7/25/15 - \$20.00

1 Mile Walk - \$10.00

Awards will be presented to overall male and female winners as well as top three finishers in each gender's age division.

The Gillen family would like to announce that all proceeds raised from the 2nd Annual Mike Gillen Memorial 5K will be donated to Morenci resident Sherri Dillon. Sherri was diagnosed with aggressive malignant neoplasm of the temporal lobe on May 5, 2015. Since that time, Sherri has undergone neurosurgery and is currently receiving radiation and chemotherapy. It is our hope that the money raised from our event will help ease some of the financial and emotional burdens experienced by the Dillon family as they take on this serious health issue.

Mike Gillen Memorial 5K

Make Checks Payable to The Christian Mission [Event Sponsor] and write Mike Gillen Memorial 5k in the check memo

Mail entries to: The Christian Mission, 1239 Wolf Creek Hwy, Adrian, MI 49221
Any Questions??? Call Our Office 517.263.7430

Name _____ **Age** _____ **M or F** [Circle One]

Address _____ **Email** _____

City _____ **State** _____ **Zip** _____ **Phone** _____

Event [Circle One] **5K Run** **1 Mile Walk**

T-Shirt Size [Circle One] **XS** **S** **M** **L** **XL** **2XL** **3XL** **Other** _____

I will not be competing but I would like donate \$ _____ **T-Shirt?** **Yes** _____ **No** _____

By signing below, I understand that running is a potentially hazardous activity and I agree not to participate unless I am trained properly and medically able. I am voluntarily entering and assume all risks associated with participating in the event, including but not limited to falls, traffic, weather and the road conditions. I waive all liabilities from anyone associated with the Mike Gillen Memorial 5K including, but not limited to, sponsors, competitors, and event staff. By signing below, I understand the risks associated with running in this event.

Signature of Participant _____ **Date** _____

Signature of Parent [If participant is under 18] _____ **Date** _____