

Epilepsy Association



5K & 1 Mile Run/Walk & Family Day Sunday, October 1, 2017

Race starts and finishes at:

Merwin's Wharf: 1785 Merwin Ave, Cleveland 44113

Schedule of Events:

- 7:30 AM Packet Pick Up/ Race Day Registration
Family Fun Day Begins
- 9:00 AM 5K & 1 Mile Run/Walk begins
Awards Ceremony after the race
- 11:00 AM Brunch at Merwin's Wharf
(discounted brunch is available—only
\$10 with a race bib.)

All Registered Participants Receive:

- >Official race t-shirt
- >Discounted brunch buffet at Merwin's Wharf-SAVE \$8.00!
- >Family access to the Associations Annual Family Fun Day
- >Post race snack and beverages
- >Awards for top finishers
- >Other coupons and goodies

Entry Fee:

Pre-Registration: 5K—\$25 / 1 Mile—\$20

Online Registration: www.epilepsyinfo.org

Race Day Registration: 5K—\$30 / 1 Mile—\$25
(checks and cash only)

Make check payable to Hermes Sports and Events & send entry form to:

2425 West 11th Street, Suite #2
Cleveland, Ohio 44113

**Mailed entries must be received by
Wednesday, September 27, 2017.**

Online Registration:

www.epilepsyinfo.org
Online registration will close on Friday, September 29 at 9AM.
Credit cards accepted with online registration.

5K Awards: Top overall male and female finisher and top 3 (male & female) in the following age groups:

14 & Under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

PROCEEDS BENEFIT THE PROGRAMS OF THE EPILEPSY ASSOCIATION; THE REGION'S COMMUNITY-BASED PROVIDER OF SERVICES FOR CHILDREN AND ADULTS WITH EPILEPSY AND OTHER SEIZURE DISORDERS.

REGISTRATION

In consideration of acceptance of this registration, I hereby agree to absolve and hold harmless of blame and liability, waiving any and all rights and claims for damages, my heirs, executors, administrators, may have against the Epilepsy Association, their employees, officers, trustees, volunteers, Hermes Sports & Events, and others associated with this event including, but not limited to vendors, participating communities and clubs, either singly or collectively, resulting from any injury, harm, loss, damage, misadventure or inconvenience suffered or sustained as a result of participating in the eRACE Competition and its associated activities. I understand that I am solely responsible for my health and safety and I acknowledge that I am physically capable of participating in and completing this event. I give my permission for the free use of my name and/ or photograph in any broadcast, telecast of other account of this event. I acknowledge I have read, understand and accept all the conditions in this waiver.

Signature (Parent/Guardian if under 18)

Date

Participant Registration (Check one)

5K Race

1-Mile Run/Walk

\$

Additional Donation

Name

Gender— circle one: M or F

Address

City, State, Zip

Phone

Date of Birth

Email

Age on Race Day

Please Circle T-Shirt Size Youth-L Adult S M L XL XXL

I am interested in learning more about the eRACER Charity Fundraising Team

For Questions contact: Epilepsy Association (216)579-1330 www.epilepsyinfo.org