# 11th Annual

# James Faucett, III Sickle Cell Awareness

#  3K Run/Walk

# Saturday, September 10th - Wilmington, DE

**NOTICE:** YOU MAY WALK WITH STROLLERS. NO DOGS ALLOWED DUE TO INSURANCE LIABILITY.

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**Race Time: 10:00 am** (registration opens at 9:00 am)

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**Location:** P.S. Middle School Track , 701 W. 34th Street, Wilmington, DE 19802

**Entry Fee:** $20.00 Adults (18 years & older) I $10.00 (17 years & under) I Free <10 years

**Benefits:** Sickle Cell Anemia Outreach and Awareness

**Course:** Starts at the P.S. Middle School Track**.**

**Timing:**  Track Timing/Tracking Systems**.**

**Amenities:** TEE shirts plus refreshments.

**Awards:** Top Male and Female Winner Awards

**Entry Info: Make checks payable to "TOVA Community Health Sickle Cell Outreach" I CashApp - $TOVAHealth**

**Contract:** For more information, contact (302) 429-5870 ext. 120. I Email: contact@tovacommunityhealth.org

“A New Beginning, Breaking The Cycle"

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**Mail Entry: James Faucett III Sickle Cell Awareness 3K Run/Walk, PO Box 9663, Wilmington, DE 19809**

**EFax Entry:** (888) 433-4219

**Sickle Cell Awareness 3K (2Miles=8Laps) Run/Walk (Please print neatly)**

**Name:□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□**

**Address:□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□**

**City:□□□□□□□□□□□□□□□□State:□□ Zip Code:□□□□□□**

**Telephone:□□□□□□□□□□ □□ Gender: □ Male □ Female**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**T-Shirt Size: S M L XL XXL □ 3K Run/Walk**

 (Please circle one)

 Please discourage unofficial entrants (bandits) from competing

 in our races. Bandits consume scarce resources and can delay

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or inhibit accurate race results. Unregistered runners, wearing

 (Parents signature if less than 18 years old) headphones are prohibited on the race course at anytime to ensure

 runners' safety and to comply with liability insurance standards.

In consideration of this entry being accepted, I, intending to be legally bound, hereby for myself, my heirs, executors, administrators,

waive and release any and all rights I may have against the organization holding this event, its agents, representatives, successors and assigns for any and all injuries suffered by me at said race.

**NO REFUNDS-THE RACE DIRECTOR RESERVES THE RIGHT TO REJECT ANY ENTRY. TOVA is a 501(c)3 ORGANIZATION. DONATIONS ARE TAX DEDUCTIBLE.**

**www.tovacommunityhealth.org/events**