

ALBERT THORNTON MEMORIAL RUN FOR VALLEY HAVEN SCHOOL

41ST ANNUAL



1 Mile and 5K and 10.5K RUN

SATURDAY, MAY 6, 2017

Valley Haven School
P. O. Box 416 ~ 6345 Fairfax By-Pass
Valley, AL 36854
(334) 756-2868 or (334) 756-7801

5K – 8:25 A.M. E.D.T.
1 Mile – 8:30 A.M. E.D.T. 10.5K – 9:15 A.M. E.D.T.

- Awards:** All runners will receive a great T-Shirt with their registration. Medals for overall winners, masters winners, and 1st, 2nd, and 3rd place male and female in 10 year age groups for 5K and 10.5K.
- Run Location:** 6345 Fairfax By-Pass, Valley, AL 36854 (Valley Haven School)
- Refreshments:** Gatorade, hamburgers, snacks, and water for everyone.
- Family Fun:** A children's fun area is provided. Lots of fun for the whole family.
- Directions** Three miles inside Alabama, going south on I-85 take Alabama Exit 77. Go left (south) for 1 mile on Fob James Drive.
From Georgia: Turn right at the 3rd traffic light onto Fairfax By-pass. Valley Haven School is located 6/10 of a mile south on Fairfax By-Pass.
- Entry Fee:** For one event, **\$15.00 if postmarked by April 29th**. After the 29th of April and on Race Day, \$20.00.
For two events, \$25.00 pre-registration or \$30.00 day of race.

The Run events on Hike/Bike/Run Day consist of a 1 mile, 5K, 10.5K Run. (You may also choose to walk.)
All events are on Eastern Daylight Time – 8:25 for 5K, 8:30 for 1 mile and 9:15 for 10.5K.

Valley Haven serves 132 children and adults with intellectual and developmental disabilities and their families. This run is part of the annual fund drive.

2017 VALLEY HAVEN RUN REGISTRATION

PRE-PAID

5K @ 8:25 a.m. EDT _____ 1 Mile @ 8:30 a.m. EDT _____ 10.5K @ 9:15 a.m. EDT _____

Date of Birth: _____ **Age:** _____ **Sex:** _____

Name _____ **Phone** _____

Street/Box _____ **City** _____

State _____ **Zip** _____ **School (if student)** _____

E-mail Address _____

Choose a hat _____ **OR** Circle Shirt Size: S M L XL XXL (or specify any child's size _____)

***IMPORTANT: Participants under age 18 MUST have this form signed by a parent or guardian.**

Registration/Release Consent: In consideration of the furtherance of the purposes, objectives, and work of Valley Haven School and The Arc of the Chattahoochee Valley, Inc., and in consideration of their permitting me to participate in the Hike/Bike/Run, on behalf of myself, my parents, my heirs, executors, administrators and assigns, I or we hereby waive and release any and all rights and claims for damage which I or we may incur against Valley Haven School or The Arc of the Chattahoochee Valley, Inc., as well as any other injuries which I may suffer while taking part in the event or as a result thereof. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit to participate in this event.

Participant's Signature _____ **Parent's Signature** _____

(# 18 or older)

(# under 18)

More information is available by calling Valley Haven School at (334) 756-2868 or visit our web site at www.valleyhavenschool.org or our e-mail address is valleyhaven@vhsarc.org.