



The Good Samaritan Health Clinic turkey trot

THURSDAY, NOVEMBER 24, 2011

What 5K Run/Walk

Where Registration and race begins and ends at
The Good Samaritan Health Center

Entry fee 5K Run/Walk- \$20 pre-registration
After November 14 \$25 registration fee
(Registration fee is non-refundable)

Awards Award ceremony will be held at 9:40 a.m.

Walk (Male and Female) Overall, Masters (40+), Grand Masters (50+)
Top 3 Age Group: 19 and under, 20-29, 30-39, 40-49, 50-59, 60+

Run (Male and Female) 19 & under, 20-29, 30-39, 40-49, 50-59, 60+

AID & WATER STATIONS AVAILABLE DURING THE RACE

7:00 a.m. Race day registration & race packet pick-up for pre-registered participants.
8:00 a.m. 5K Run
8:05 a.m. 5K Walk

All 5K Run/Walk participants will receive a First Annual Turkey Trot Race Shirt.
Entries must be received by November 14, 2011.

MAIL COMPLETED REGISTRATION FORM AND REGISTRATION FEE TO:

CHECKS PAYABLE TO GSHC-TURKEY TROT

For more information, contact:

Andy Sanders 335-5258 asanders@planters-bank.com
Kim Dowdy 332-5151 gkdowdy@suddenlink.net

FIRST ANNUAL TURKEY TROT 5K
GSHC
313 ARNOLD
GREENVILLE, MS 38701

NAME: _____
ADDRESS: _____
CITY/ST/ZIP: _____
PHONE: _____
EMAIL: _____

AGE (AS OF 11/24/11): _____
SEX: M F
EVENT (Circle one):
5K RUN 5K WALK
SHIRT SIZE:
S M L XL XXL

All consideration of acceptance of the entry, I hereby waive any and all claims for myself and my heirs against the Good Samaritan Clinic and each of its agents, servants, officers and employees for injury or illness which may directly or indirectly result in my participation in the event. I further agree to save and hold GSC harmless and agree to indemnify each said person against any liability for any loss, costs, injury, or damage to persons or property which may arise by virtue of undersigned engaging in the race. I further state that I am in proper physical condition to give my permission for the free use of my and/or minor child's name and/or picture in any broadcast, telecast or other accounts of this event. I further attest and certify that my minor child and/or I are physically fit and have sufficiently trained for competition in this event.

SIGNATURE: _____ **DATE:** _____