

PRESENT THE FIFTH ANNUAL



SATURDAY, JUNE 23, 2018
BERLIN POND

Kids Race at 8:45 am
Adult Race at 9 am

REGISTRATION **\$20** | Received by Wednesday, June 20
(form on reverse) **\$25** | Race day, 7:30-8:30 am

DIRECTIONS Take exit 7 off I-89. Turn right onto Paine Turnpike N. Turn right onto
Crosstown Rd. Turn right onto Shed Rd. Continue to parking lot.

PARKING Town clerk's office, 108 Shed Rd., Berlin. *No parking along race course.*

COURSE Five-mile loop around Berlin Pond on dirt roads with one water & food stop.
First half very hilly; second half relatively flat. *No headphones or dogs please.*

AWARDS Prizes for top finishers in all age groups. All participants receive a special gift.

All proceeds benefit the Health Care Share, a farm-to-hospital public health program that connects Vermont families with fresh, healthy food and nutrition education at their doctor's office. The Health Care Share is a partnership between VYCC and UVM Health Network - CVMC with support from Hunger Mountain Co-op.

— FIVE MILE —
Fun Run
(AND WALK)

Please make check payable to: Central Vermont Medical Center
Mail form to: 130 Fisher Road, Berlin, VT 05602, c/o Human Resources - Fun Run
Credit cards accepted. Visit cvmc.org/fun-run.

Name _____ Age (Race Day) _____

Race type (circle): Runner Walker

Sex (circle): Male Female

Address _____

City _____ State _____

Zip _____ Email _____

FOR MORE INFORMATION, call **371-4191** or visit cvmc.org/fun-run

You may also contact the Race Directors:

Robert Patterson: Robert.Patterson@cvmc.org

Monica Urquhart: Monica.Urquhart@cvmc.org

I hereby waive, release, and discharge any and all claims from damages for death, personal injury or property damage which I may have or which may hereafter accrue to me as a result of my participation in the CVMC Five-Mile Fun Run (and Walk). This release is intended to discharge the promoters, sponsors, officials and any public entities, from and against any and all liability.

Signature: _____ Date: _____

Signature of parent or guardian if under 18:

_____ Date: _____

Office Use Only:

Paid by check Paid cash (Race Day only) Paid by credit card (Seven Days Tickets)