am in proper physical condition to participate in this event.

Rehabilitation Services of Tifton

and

Tifton Fitness & Wellness Center

present the 16th Annual

Sweetheart Run

Saturday • February 9, 2013 Tifton, Georgia

5K Sweetheart Run at 9:00 am 1 Mile Clot Trot at 9:45 am

Location:	Rehabilitation Services of Tifto	on			
	1488 Old Ocilla Road Traffic light in front of Tift Reg	gional Medical Center			
Entry Fee:	5K Run - \$20 early registration, \$25 after Feb 2nd 1 Mile Run & Walk - \$15 early registration, \$20 after Feb 2nd Proceeds will go to HEMOPHILIA OF GEORGIA, a nonprofit organization dedicated to providing services and support for Georgians who have hemophilia and other inherited bleeding disorders.				
T-Shirts:	All registered runners and walkers will receive a long sleeve t-shirt.				
Awards:	Trophies for Overall Male & Female Winners, Overall Male & Female Masters, and top three finishers in each age group 19 & under. Travel insulated mugs for top three finishers in each age group 20+.				
Information:	Contact Sommer Dunston or Cindy Spurlin Phone: 229-386-5200 • Fax: 229-386-1412 • Email: rst.sdunston@yahoo.com • www.rehaboftifton.com				
2013 5K Sw	veetheart Run and 1 M	lile Clot Trot			DO NOT WRITE INSIDE BOX
Name		Phone ()	_	
Address		City	StateZip		
Birthdate	Age Gender_	ADULT T-shirt Size	:□S □M □L □XL □	□ 2X □	
Email		YOUTH T-shirt Size	::□S □M □L		
	nter the following event(s): 20, After Feb 2nd \$25	☐ Both - \$5 OFF TOTA	AL - \$30, After Feb 2r	Mail to	Checks Payable to: TF&WC o: PO Box 7508 Tifton, GA 31793
☐ 1 Mile	- \$15, After Feb 2nd \$20	☐ Both - 2 T-SHIRTS -	- \$35, After Feb 2nd \$	\$45	
In consideration of	f the acceptance of this entry form, I	hereby waive any and all claims f	or myself and my heirs agair	st officia	als, hosts, or

sponsors of the Sweetheart Run & Walk for injury or illness which may directly or indirectly result from my participation. I further attest that I

SIGNATURE of ENTRANT or PARENT if entrant is under age 18