Lifetime WELLS
Water is life. INTERNATIONAL
lifetimewellsinternational.org

11th Annual – Walk for the "WELL" of it

All proceeds will benefit ***Lifetime Wells International***

WHEN: **Sunday, March 22, 2020** **START TIMES:** **5K Run** *at* **8:00** am – **Fun Walk** *at* **8:15** am

WHERE: **Hunter's Oak Golf Course**, 500 Amberly Farm Lane, Queenstown MD 21658

REGISTRATION:

5K Race	Fun Walk	Sleepwalker
$30 – Pre-registration *by* March 6, 2020	**$20** – Pre-registration *by* March 6, 2020	**$15** – Pre-registration *by* March 6, 2020
$40 – *after* March 6, 2020	**$30** – *after* March 6, 2020	**$20** – *after* March 6, 2020

NOTE: **Race day registration** onsite at **7:00** am

CHECKS PAYABLE: **Lifetime Wells International**

MAILED TO: Attn/**Marie Freeman**, **24321 Shore Hwy**, **Denton MD 21629**

AWARDS: Presented to the **5K Run Overall** M/F finishers, **Overall Masters** M/F [40+] finishers, and **Top finishers** M/F in each **5K age group**:
[13 & under] [14 – 19] [20 – 29] [30 – 39] [40 – 49] [50 – 59] [60 – 69] [70 & over]

AMENITIES: **Event T-shirts** are guaranteed to *all pre-registered participants*

TEAR HERE

Name: _____

Street: _____

City: _____ **State:** ____ **Zip:** _____

E-Mail: _____

Phone: _____

Age: _____ *(circle)* **Sex:** **F** **M**

T-shirt: *(circle)* Youth **Med** Adult **SM** Adult **Med** Adult **LG** Adult **XL** Adult **2XL**

(circle) **Event:** **5k Race** **Fun Walk** **Sleepwalker**

Payment: Cash $ ____ *or* Check number: _____

Amount: *(circle)*

***Pre*-registration:**	***After* March 6:**
$30 5K Race	**$40** 5K Race
$20 Walk	**$30** Walk
$15 Sleepwalker	**$20** Sleepwalker

Release of Liability: *I know that running a race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely compete and run. I assume all risks associated with running in this event including but not limited to: falls, contact with other participants, the effects of the weather, including cold, high heat and/or humidity, traffic and the conditions of the road, all risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and anyone entitled to act on my behalf, waiver and release: Lifetime Wells International, Hunter's Oak Golf Course, and all sponsors, their representatives and successors from claims arising from my participation in this event though that liability may arise out of carelessness on the part of the persons named in this waiver.*

Signature: _____ **Date:** _____ *Official use only*

Parent Signature *(under 18)*: _____ **Date:** _____ **BIB:**