



6:00 am
Registration Opens

7:30 am
5K Run & Walk
10K Run

8:20 am
1/4 Mile Kiddie Dash

Register online by
September 14 at:
www.hovf.org/5k
Credit Cards Accepted

Register Early & Save
All registration fees, except
Kiddie Dash increase by
\$5 September 14, 2010
through day of event.

- T-shirts (Guaranteed to first 800 registrants)
- Goodie bags
- Food and beverages

Attention Runners:

- This race is the first race of the Daytona Area Grand Prix.
- This race will be timed with Champion Chips.

For more information,
please call: 386.322.4701

Directions:

Kenneth W. Parker Amphitheater is located at 2001 City Center Circle, Port Orange. From I-95 exit at Dunlawton (Exit 256), go east and make left at City Center Parkway. Follow signs to designated parking area.

9th Annual

5K/10K RUN & WALK

Celebrating the Spirit of Caregiving

Sunday, September 19, 2010

New Location - Kenneth W. Parker Amphitheater in Port Orange City Center Circle

REGISTRATION - PLEASE PRINT

Name _____ Age on Race Day _____ Date of Birth _____ / ____ / ____
 Address _____ Male Female
 City _____ State _____ Zip _____
 (_____) (_____)
 Phone (Home) _____ Phone (Work) _____ Email _____

T-shirt Size: S M L XL XXL
 (Adult Sizes)

Event:

- 1/4 Mile Kiddie Dash (10 & under)
- 5K Run*
- 5K Walk
- 10K Run
- Caregiver Supporter (not present)

* A Daytona Area Grand Prix Event ** Youth: 18 yrs. old & under

Method of Payment:

- I have enclosed a check made payable to HOVF 5K/10K Run & Walk
- Please bill my: MasterCard Visa AMEX

Card # _____ Exp. Date _____
 Name as it appears on the card _____ Signature _____

Please mail registration form and payment to:
Halifax Health - Hospice - 5K/10K Run & Walk
 3800 Woodbriar Tr., Port Orange, FL 32129

Waiver Form:

I, the undersigned, hereby represent that I do not have any medical/physical conditions which would be adversely affected and/or aggravated by my election to participate in the 5K/10K Run & Walk. I do hereby release and forever discharge Halifax Hospice Inc., (d/b/a) Halifax Health - Hospice of Volusia/Flagler, all event sponsors, Halifax Health, Halifax Health - Medical Center of Port Orange, their officers, employees, agents, administrators, and assigns from any and all claims, demands, actions or rights of action, of whatsoever kind or nature, arising from or by reason of any bodily injury or personal injuries resulting from any occurrence as a result of my election to participate in said event.

I give my full permission to Halifax Health - Hospice of Volusia/Flagler and event sponsors to use my name, any photographs and video tapes that are made during the event.

Dated this _____ day of _____ 2010.

Participant Signature _____ Date _____ / ____ / ____
 Parent/Legal Guardian Signature (if participant is under 18) _____ Date _____ / ____ / ____

Pre-registration & Packet Pick Up
 September 17, 12:00 - 6:30 pm
 September 18, 8:00 am - 12:00 pm
 Halifax Health - Hospice
 Care Center in Port Orange
 3800 Woodbriar Tr., Port Orange

**Unable to attend?
Be a Caregiver Supporter**
 If you cannot be with us on Sunday, September 19, but would like to support the Spirit of Caregiving, you can pre-register and pick-up your t-shirt and goodie bag on September 17 or 18 at Halifax Health - Hospice Care Center in Port Orange.

Halifax Hospice, Inc., d/b/a Halifax Health - Hospice of Volusia/Flagler is exempt from federal income tax under Section 501(c)(3) I.R.C. Contributions are tax deductible to the extent allowed by law. Our tax ID number is 59-2661284. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE WITHIN THE STATE 800-435-7352 OR CALLING OUTSIDE THE STATE 850-488-2221. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.