

14th Annual - 2019 Edition

Challenge Diabetes 5K



Bunker Hills Regional
Park, Andover, MN
Saturday, May 4
8 AM Start

RUN & RACE WALK
& Kids 1/3 Mile Challenge Fun Run

*“Taking Strong Steps
to Defeat Diabetes”*

8 AM 5K Run & Walk - Entry Fee: \$35 pre-registered by May 1; \$45 race day

Subtract \$5 from entry fee for no commemorative event shirt option

9:15 AM - Kids 1/3 Mile Fun Run - Entry Fee: \$12 pre-registered (Includes shirt/free w/o event shirt)

7 AM - Pre-registered Check-in/Bib # & Shirt Pick-up, and Race Day Registration Opens

Online Entry, Event Records/Photos & more available at www.CharitiesChallenge.org

5k on USATF certified course in beautiful Bunker Hills Regional Park; Start/Finish @ Activities Center
& for the second time simultaneously running with the 15th Annual Challenge Arthritis 5k

Recognition: Complete 5k results by USATF Youth, Open, Masters (5-year age groups > age 40-80+)
Added values: Happy, colorful commemorative race shirt, CC hospitality, announcer, photos slideshow,
motivational music & healthful tasty treats for all event participants.

Challenge Diabetes with appropriate and highly effective RxExercise

Celebrate those “Living Well Beyond Diabetes” who say, “I’m Moving My Feet to Defeat My Diabetes”
Appropriate RxExercise is an irreplaceably powerful prescription for people at risk to diabetes to optimally manage and
improve their quality of daily life, by being physically active through and well beyond their diabetes challenges.

Learn @ “Diabetes & the Power of Rx Exercise” www.CharitiesChallenge.org; 612-245-9160

Return this Registration to: **Charities Challenge, 1516 Sunny Way Court, Anoka, MN 55303**

2019 Challenge Diabetes 5k pre-registered fee \$35 'til May 1; \$45 race day: _____

Kids Challenge 1/3 Mile \$12 pre-reg by 5/1; \$20 race day (includes shirt; free w/o shirt) _____

Included Commemorative T-shirt XS __ S __ M __ L __ XL __ Only for sizes: 2XL __ (Add \$4) 3XL __ (Add \$5) _____

Subtract \$5 for no commemorative event shirt option - _____

Thank you for any tax-deductible donation \$5, \$15, \$25 or more supporting CC RxExercise Programs \$_____ TOTAL = \$ _____

Name _____ Sex ___ Age ___ Birth Date ___/___/___

Address _____ Phone(s) _____/_____

City/State/Zip _____ E-Mail _____

Optional Registration Questions:

Yes! This is My First-ever Race Event! I’ve previously raced in CC Events - Est # _____

“I’m Moving My Feet to Defeat My Diabetes” with my RxExercise! DM Type I or II? Diagnosis Date: _____

I want info @ CC Rx Exercise Training Programs & Events in the Twin Cities so I can stay active all year long.

I want info @ CC Programs like CC Travel-Team-Expenses-Paid “Ambassadorships” to inspiring destinations.

Knowingly and at my own risk I do hereby apply to enter an athletic contest. I hereby agree that I release and discharge Charities Challenge, Anoka County Parks, or any agent of any of these organizations or their successors from all claims, demands, injuries, damages, actions or causes of action and from all acts of active or passive negligence on the part of such organizations or corporations, or their agents. The undersigned also grants full permission to the race and any organization conducting the race and or agents authorized by them to use any photographs, videotapes, or other record of this event for any purpose. I agree to abide by road race etiquette and safety rules for safe racing by not bringing onto the course during the races any leashed or unleashed pets/animals.

Signature _____ Co-sign _____ Date _____ (< age 18, guardian sign)