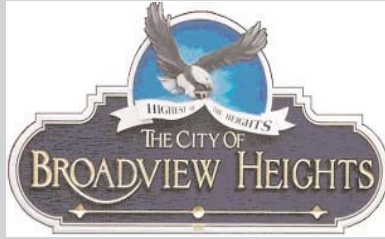


MAYOR ALAI'S 1ST ANNUAL:



5K & 1 MILE WALK/RUN FOR HEALTH AND WELLNESS Sunday, July 13th, 2008

SPONSORED BY

**Parma
Community
General Hospital**



Benefiting Parma Hospital Health Care Foundation and Broadview Heights Youth Sports

Place: This is a special event for the whole family in conjunction with the Summer Festival. Race begins and ends at Broadview Center, 9543 Broadview Road, Broadview Heights, 44147. On-site parking will be available.

Time: 7:30 a.m. - Race-day registration. Registration will take place under the Summerfest main entertainment tent.
8:30 a.m. - 5K (3.1 miles) Run and 1 Mile Walk/Run begin.

Fees: 5K Run: \$15 by July 9; \$20 race day, 1 Mile Walk: \$7 by July 9; \$10 race day
Register online at www.hermescleveland.com until July 9 (online processing fee applies).

Family Rate: \$12/person for the 5K and \$5/person for the 1 Mile. Must be three or more people living at the same address. Valid through the mail only.

Awards: Will be given to chip-timed 5K racers finishing in the top three in each age group. Age groups (male & female): 10 & under, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60 & over.

T-shirts will be given to the first 250 entrants. Refreshments for walkers and runners following the race.



Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

E-mail Address _____

In consideration of your accepting this entry, I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Parma Hospital, Hermes Sports and Events, City of Broadview Heights, their representatives, successors, and assigns for any and all injuries suffered by me in said event or in transit to and from said event. I further attest that I am physically fit and have sufficiently prepared for this event. I will additionally permit the use of my name and/or pictures in marketing materials.

Signature _____

T-shirt size: YS YM YL AS AM AL AXL AXXL Owner Chip Code: _____

M F Age on day of race _____ DOB _____ 5K Run 1 Mile Walk/Run

Send application and check to:
HERMES SPORTS & EVENTS
1624 St. Clair Avenue, Cleveland, OH 44114

For information, call 216.623.9933
or visit www.hermescleveland.com