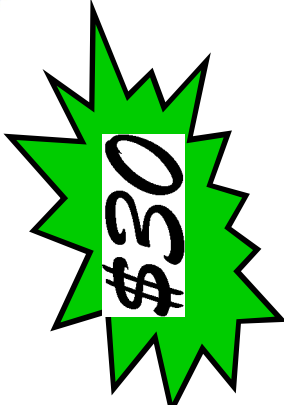


Each

Participant
receives a
GREAT long
sleeve

T-shirt, goody
bag and BBQ
lunch & drinks
(beer for those
over 21)

after the
5K finishes



Questions?

229-881-7046

**RUN & SEE
GEORGIA**



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14th Annual
2017

**Run for your
LUNGS**

Jackie's Run for Life

Lake Blackshear
RESORT & GOLF CLUB

Cypress Grill Area

Saturday November

**Michelob
ULTRA**

**Friday Packet
Pickup &
Pre-Run
Gathering @**

**Cypress Grill
featuring
Stephen Harrell
singing acoustic**

100% of NET Proceeds
raised go to our own 501(c)3
non-profit to raise aware-
ness for lung cancer & help
local lung cancer patients!!

EIN: 46-1444785

5K Run Begins @ 9:30 AM ... 1 Mile Fun Walk
Please come @ 9 if you need to register or get your packet

**REGISTER TODAY @
WWW.RUNFORYOURLUNGS.ORG**

www.facebook.com/runforyourlungs



CIRCLE EVENT:

5K 1 Mile

RUN Walk

CIRCLE T-Shirt Size:

ADULT: S M L XL XXL

YOUTH: L M

CIRCLE SEX

Male Female

AGE on 11/4/17

BIBB # _____

(Staff will issue bibb #s)

In consideration of my participation in the RUN for your LUNGS 5K run, 1 mile fun walk, volunteering or being a spectator, on 11/4/2017, I, for myself, my heirs, executors, and administrators assume all risks associated with and hereby release, waive and hold harmless RUN for your LUNGS Jackie's Run for Life, Inc., Shelia Knight or any of the corporate board officers or board of directors, Lake Blackshear Resort, GA Veteran's State Park, Albany Beverage, Michelob Ultra, the sponsors, the volunteers, and officers, employees, agents, representatives, successors, and assigns from any and all liability or responsibility for injuries and/or property damage which I may sustain during the event or during my travel to or from the event. This waiver and release covers myself (including all heirs, executors, or administrators) and is given in consideration of the RUN for your LUNGS Jackie's Run for Life acceptance of my registration/entry, into the event, my volunteering or being a spectator. In addition, I agree to defend and indemnify RUN for you LUNGS Jackie's Run for Life, Inc., Shelia Knight, or any of its corporate officers or board of directors from any claim or action filed by a third party due to my actions in this event. I also attest that I am physically fit to participate in RUN for your LUNGS event. I agree to abide by the rules and regulations of the event. And, I grant full permission to RUN for your LUNGS Jackie's Run for Life, Shelia Knight, and/or agents authorized by them to use any photographs, videotapes, videotapes, motion pictures, recordings, or any other record of this event for any purpose.



Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____

Email _____

Date of birth _____

\$30.00 Adults \$15.00 Children 10 & Under

Questions: Shelia Knight 229-881-7046

Signature (Parent or Guardian if Minor) _____ Date _____

Printed Name (Parent or Guardian if Minor) _____

Minor's Name if under 18 _____

MAIL to:

RUN for your LUNGS

Shelia Knight

P.O. Box 1594

Albany, GA 31702