



2020 Cancer Cruise

5K Fun Run & Walk

REGISTRATION FORM



Benefitting Andrea Harbarth of Gaylord
Saturday, May 30, 2020

Andrea was diagnosed with stage 4 Colorectal Cancer in April of 2019, after doctors discovered a 50 cm mass in her rectum. The cancer had also spread to her liver and lymph nodes. She has undergone multiple rounds of chemotherapy and radiation. In October of 2019, the doctors removed a portion of her colon, two sections of her liver, and over 20 lymph nodes. She is currently taking chemotherapy treatments. Andrea was in the process of opening her own daycare when she was diagnosed. **ALL** the proceeds raised from the 5K will be used for Andrea's medical expenses.

LOCATION: **Four Seasons Park, Arlington, MN** – 2 blocks South of Main Street on 1st Avenue

TIME: **8:00 AM** Race Day Registration Begins

8:30 AM 5K Fun Run & Walk Begins

ENTRY FEE: **\$25** (If pre-registered by **April 30, 2020**)

\$30 after April 30th - No T-shirt Guarantee

Name: _____

Address: _____

City & Zip: _____

Phone: _____ Email: _____

T-shirt size guaranteed if pre-registered before **APRIL 30, 2020**. Registrations received after the pre-registration deadline will not be guaranteed a t-shirt. The T-shirts are gray, and will have the logo shown at the top of this form on them.

KID'S T-shirts ___ S (6-8) ___ M (10-12) ___ L (14-16) *NOTE: Kids XL is the same as an Adult S.*

ADULT sized T-shirts ___ S ___ M ___ L ___ XL ___ 2XL ___ 3XL

ADULT TALL ___ LT ___ XLT ___ 2XLT ___ 3XLT

In consideration of the acceptance of my entry, I hereby waive and release CGH, Inc. of Arlington, MN, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, for which I am physically fit and trained to participate.

PARTICIPANT SIGNATURE: _____

PARENT OR GUARDIAN SIGNATURE (if under 18) _____

Please make checks payable to: **Community Giving Hope (CGH), Inc.** and mail your payment & form to:

Community Giving Hope, 42205 260th St., Arlington, MN 55307

For Questions, please call: (507) 964-5603 or Email: CancerCruise55307@gmail.com