





SAVE THE DATE SATURDAY, SEPTEMBER 23, 2023

THE CELEBRATE LIFE SURVIVORS 5K IN WACO

Mark your calendar & be a part of the 1st Annual CELEBRATE LIFE SURVIVORS 5K RUN presented by Texas Oncology with Ascension Providence Hospital and benefiting the Waco Community.



Individual Registration and Sponsorships available online at CelebrateLifeWaco.com. Questions? Call (817) 915-4373

- \$30 early-bird registration, before August 23 guarantees an event T-shirt
- \$40 registration after August 23
- \$15 kids registration (12 and under)
- Organize a team of five or more participants and receive a \$5 discount per registration.
- Become a sponsored runner and raise \$100
- Volunteer during the event.

Register today at CelebrateLifeWaco.com









REGISTRATION FORM

FOUNDATION

EVENT INFORMATION

Packet Pickup at Ascension Providence Auditorium (6901 Medical Pkwy, Waco, TX 76712): Friday, Sep. 22 (3:00-6:00pm)

Race Takes Place at Indian Spring Park (101 N University Parks Dr, Waco, TX 76701): Saturday, Sep. 23

TIME: 7:30am Check-In Opens 8:15am Survivors Celebration Lap

8:30am 5K Begins **EVENT FEE:** \$30 (on or before Aug. 23) \$40 (after Aug. 23) \$15 Kids 12 and under

*Event t-shirt guaranteed to participants who register on or before September 22

PARTICIPANT INFORMAT	TION					
Name:	DOB (required):		·	Gender:	M	
Address:		City:	State/Zip:			
Phone:	Email:					
REGISTRATION INFORM	ATION					
☐ \$30 (on or before Aug. 23)	☐ \$40 (after Aug. 23) ☐ \$15	(kids 12 and unde	r)			
T-Shirt Size:	_(Adult Small - XXXLarge) *event	t-shirt guaranteed to p	articipants registered on c	r before Aug	. 23	
PAYMENT INFORMATIO ☐ Check enclosed made payab ☐ Cash is enclosed	N ble to "Texas Oncology Foundatio	n" (please note "W	aco 5K on the memo	line)		
*If you would like to pay by cre	edit card please visit our event si	te to register: www	.CelebrateLifeWebste	r.com		
TRATORS, DO HEREBY FOREVER RELEASE, WAIVE, CO OTHER SPONSORS, THEIR MEMBERS, OFFICERS, EMP DAMAGES, INCLUDING COURT COSTS AND ATTORNEY ACTIVITY, WHILE TRAVELING TO AND FROM THE ACTIV JOINT, OR CONCURRENT NEGLIGENCE, NEGLIGENCE FOUATE PHYSICAL CONDITION TO COMPLETE THE AC FOUNDATION OR RUNSIGNUP.COM, CONTINUING THE PHOTOGRAPHS AND VIDEO OF ME AND TO TAKE PHOTASSIGNS AND TRANSFEREES TO COPYRIGHT, USE AND	R THE CELEBRATE LIFE SURVIVORS 5K RUN (THE "ACTIVIT VENANT NOT TO SUE, INDEMNIFY AND AGREE TO HOLD IT LOYEES, AGENTS, OR VOLUNTEERS ("RELEASEES" ANDO," S' FEES AND EXPENSES, WHICH MAY OCCUR TO MYSELF ITY, OR WHILE ON THE PREMISES OWNED, LEASED, OR CPER SE, STATUTORY FAULT, OR STRICT LIABILITY OF RELE. TIVITY. I AGREE TO FOLLOW ALL RULES FOR THIS ACTIVIT ACTIVITY WOULD ENDANGER MY HEALTH. I GRANT TO TE TOGRAPHS AND VIDEO OF ME AND MY PROPERTY IN CONDITION OF THE SAME IN PRINT AND/OR ELECTRONICALLY FOR SUCH PURPOSES AS PUBLICITY, ILLUSTRATION, ADVE	HARMLESS FOR ANY AND ALL PUI DR "INDEMNITEES") FROM ANY AN ; OTHER PARTICIPANTS, OR THIRI (ONTROLLED BY RELEASEES/INDE ASEES/INDEMNITEES. I CERTIFY T Y AND TO PERMIT MYSELF TO BE XAS ONCOLOGY FOUNDATION, IN UNECTION WITH THE ABOVE-IDEN ! I AGREE THAT TEXAS ONCOLOG	RPOSES TEXAS ONCOLOGY FOUNDATI ID ALL LIABILITIES, CLAIMS, DEMANDS D-PERSONS AS A RESULT OF MY PART EMNITEES, INCLUDING INJURIES SUSTA THAT I HAVE PREPARED MYSELF FOR T ERMOVED FROM THE ACTIVITY, IF, IN IC., ITS REPRESENTATIVES AND EMPLO TIFIED ACTIVITY. I AUTHORIZE TEXAS O	ON, INC., RUNSIGN S, INJURIES (INCLL ICIPATION AND CO NINED AS A RESUL' HIS ACTIVITY AND THE OPINION OF T DYEES THE RIGHT INCOLOGY FOUND	IUP.COM DING DE INDUCT FOF THE THAT I A EXAS OF FO USE S ATION, II	I, AND ALL EATH) OR IN THE E SOLE, AM IN AD- NCOLOGY SHARED NC., ITS
Authorized Signature	Printed Name		 Date			_

Please return sponsorship commitment to: Texas Oncology Foundation Attn: Natalie O'Roark 12221 Merit Drive, Dallas TX 75251 or E-mail to: Natalie.Oroark@usoncology.com