

# 8<sup>th</sup> Annual HollyDay 5K Fun Run

Saturday, September 9, 2017  
7:30 am

ENTRY FEE: \$25. Race Day registration starts at 6:30 am.

PROCEEDS GO TO THE NON PROFIT ORGANIZATION SHREDOUTCANCER.ORG

**Location:** 112 Seascape Blvd, Destin. Cabana Café, inside Seascape Resort.

Awards Ceremony immediately following, with  
Live entertainment, food, drinks and raffles with fantastic prizes.

Run will begin at Cabana Café, and runners/walkers will continue inside the beautiful Seascape Resort.  
Pre registered participants receive goodie bag and t-shirt.

On Oct. 30, 2009, the Burke family lost their beautiful, 19 year old daughter, Holly, to a rare cancer called Clear Cell Sarcoma. Holly was a wonderful daughter, and sister to four brothers and one sister. She graduated from Fort Walton Beach High School in 2009. She was very giving, and wanted to become a pediatric nurse. Holly helped create Shred Out Cancer, a non-profit foundation (501(c)(3) that supports other children with cancer, and their families. It was one of Holly's last wishes to help others and contribute to cancer research. For more information, please go to [www.shredoutcancer.org](http://www.shredoutcancer.org).  
Thank you for your support.

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Make checks payable to: Shred Out Cancer. Mail to: Maria Burke 4541 Luke Ave. Destin, FL 32541.  
Questions? Call: (850) 225-1648

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Race Day: \_\_\_\_\_ 5K Run \_\_\_\_\_ 5K Walk \_\_\_\_\_

Sex: M \_\_\_\_\_ F \_\_\_\_\_ T-shirt size: S M L XL

Emergency Contact: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

I know that running a road race is a potentially hazardous activity and I should not enter and run unless I am medically able and properly trained and by my signature, I certify that I am medically able to perform this event. I am in good health and am properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risk associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather including high heat/humidity, traffic and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of our accepting my entry, I, for myself any one entitled to act on my behalf, waive and release Shred Out Cancer, Maria Burke and Northwest Florida Track Club and Walton County, and all sponsors, their representatives and successors from all claims and liabilities of any kind arising out of my participation in this event or carelessness on the part of the persons named in this waiver. Further, I grant full permission to all the foregoing to use my name and images of myself in any photographs, videotapes, motion pictures, results, publications or any other print, video graphic or electronic record of this event for legitimate purposes.

SIGNATURE: \_\_\_\_\_

(Signature of parent if entrant is under 18)