

# Feroli Fun Run



Join us for the 5K Run, Walk or even "Stroll" Benefit for Karen Feroli on the beautiful trail at Wakefield Valley.

We will be having a Halloween children's fun run on the small trail and candy for all child participants. Children and adults are encouraged to come in costume.

## Two Events

Saturday, October 31, 2009

Registration Starts at 9:00 a.m.

Wakefield Valley Community Trail



10:00 a.m. - 5 year olds & under -200 yard dash



10:15 a.m. - Open 5K Run/Walk

**Directions:** Benefit Run/Walk will be held at the Wakefield Valley Community Trail. Follow Route 140 West, take ramp to Route 31 South. From Rt. 31 S., make a right on Tahoma Farm Rd. Parking is on the left by the Fenby Farm Boulder Park.

**Information:** Please come out and join us for our 5K fun run/walk to support our dear friend and community advocate, Karen Feroli. She is currently battling Leukemia and needs help with her medical bills. **Our goal is \$5,000 and any donation is appreciated.** Same day registration will be accepted. For more information call Rene Cree 717-642-9484 or 410-259-4023.



(Please cut and return bottom portion)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Donation: \_\_\_\_\_ Email: \_\_\_\_\_

**Return registration & donation amount by October 24th to: Rene Cree P.O. Box 2191  
Email: thecree@comcast.net Westminster, MD 21158**

**Make Checks Payable to: Karen Feroli**

In consideration of use of the Westminster City Park the Run/Walker, or if the Run/Walker is a minor, the Run/Walker's guardian(s), hereby agrees to release, indemnify and discharge the Feroli Fun Run, on behalf of the Run/Walker (adult or minor). As a participant of the Run/Walk, I understand the nature of the event and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such an event. I fully accept and assume all risks and all responsibility for any injuries incurred while participating in the Feroli Fun Run.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

If under 18, Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you to Ron Schroers and the Westminster City Recreation Department for all their cooperation and support.