

PG Portland Glass. **13th ANNUAL** NEW ENGLAND Cancer Specialists

FIGHT HARD 5K



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IN LOVING MEMORY OF LAURIE BUTLER
AUGUST 11, 2024

Fight Hard 5K is a race / walk in loving memory of Laurie Butler, organized by the Cockburn / Butler family. Laurie's tenacious spirit helped her fight a long, courageous battle with breast cancer. Growing up in Brunswick and later raising a family in North Yarmouth, Laurie touched many lives with her strength and courage. She inspired many by running 5K road races, even throughout her treatments. Fight Hard 5K is a non-profit charitable organization with all net proceeds to benefit the Dean Snell Cancer Foundation (deansnell.org). The mission of the Dean Snell Cancer Foundation is to provide financial assistance to cancer patients at the New England Cancer Specialists in Topsham.

Sunday, August 11, 2024 ~ Brunswick, ME ~ 7:45 am Start
Start and Finish at Edwards Field - Course Map on back of this Registration Form



Pre-registration: \$25.00 (\$27.75 on-line)
\$20.00 per entry for a family of 4 or more (\$22.75 online)
First 150 pre-registered runners receive a T-shirt
Race Day Registration: 6:30 - 7:30 am (\$30 cash)
DONATIONS CAN ALSO BE MADE ON-LINE!!!



UNIQUE PRIZES!!! FOR TOP 2 OVERALL MALE AND FEMALE and TOP 2 IN THE FOLLOWING AGE GROUPS: <12, 13-19, 20-29, 30-39, 40-49, 50-59, 60-69, >70.

Course Records: (M) Harrison Mosher 16:34 (2023) / (F) Rebecca Nichols 18:48 (2023)

RACE DIRECTOR: DAVID COCKBURN - E-MAIL: fighthard5k@gmail.com

REGISTER ONLINE AT: www.runinarace.com/FightHard5k/index.html

Mail-in entries payable to Run In A Race (Run In A Race, PO Box 144, Freeport, ME 04032)

Registration Form - Fight Hard 5K - August 11, 2024

Name: _____ Age on race day _____ Male / Female
Address: _____ City _____ State _____ Zip _____
E-Mail: _____ Phone _____ T-shirt Size: YS / YM / YL
Adult S / M / L / XL / XXL

Waiver: I hereby agree to release, indemnify and hold Run In A Race and Fight Hard 5K and their agents and employees harmless from any liability claims, demands, cost, or damages arising out of said program which I or my participating child may sustain during the said event. I also understand that photos of my participation may be used for promotional purposes. I have read this document carefully and signed it voluntarily with full knowledge of its significance.

Signature: _____ Date: _____
(Signature of Participant or guardian, if under 18)