



Who: YOU! And your friends and family! All levels of fitness are welcome!

What: 5k and Quarter Marathon Road Race

When: Saturday, March 18th. Packet pickup begins at 7:30 am. 5k & Quarter Marathon races begin at 8:30 am.

Where: Howard High School, 6400 Forsyth Road, Macon 31210

Why: Ronald McDonald House keeps families close by providing care for families of children receiving medical treatment in Central Georgia.

How: Early registration is available until **March 5th** (if mailed, postmarked by **March 5th**). Register online through March 17th at 10 pm at <https://www.racerpal.com/register/CherryBlossomRMHC/> or mail to 1160 Forsyth Street, Macon 31201 or fax to 478.746.0580. Registration for the 5k/Quarter Marathon includes an event shirt. All race information can be found at www.rmhcga.org or by calling the Office at 478-746-4090.

Cost:	Race	Early registration (until March 5th)	Late registration (after March 5th)
	5k	\$30	\$35
	Quarter Marathon	\$35	\$40
	Virtual/Snooze	\$25	\$25

Awards: **5k Awards** will be given to the top three finishers in each age group (M & F: under 10 and every 5 years from 10 – 70) and top overall, three Masters levels (40+, 50+, 60+) finishers. **Quarter Marathon Awards** will be given to the top two finishers in each age group (M & F: under 10 and every 5 years from 10 – 70) and top overall, three Masters levels (40+, 50+, 60+) finishers. Virtual participants are not eligible for awards.

FIRST 150 Quarter Marathon participants will receive a Finisher's Medal!

Shirt Size: **Shirts guaranteed ONLY to those who pre-register by March 7th.**

Youth shirt: YS YM Adult shirt: XS S M L XL XXL XXXL

Contact: Christen McCommon, Ronald McDonald House Charities of Central Georgia
1160 Forsyth Street, Macon, GA 31201 * 478.746.4090 (phone) * 478.746.0580 (fax) * dm@rmhcga.org

One entry per form / registration is non-refundable

Name: _____ DOB _____ Gender _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

I am registering for (check one): 5k Quarter Marathon 5k Virtual Quarter Marathon Virtual Snoozing

Race Fee(s) \$ _____ Additional Donation \$ _____ **TOTAL ENCLOSED \$ _____**

Waiver: I know that running or walking a road race is a potentially hazardous activity and in consideration of acceptance of this entry, I waive and release any and all claims for myself and my heirs against Ronald McDonald House Charities of Central Georgia, Macon, Ga's International Cherry Blossom Festival, officials, sponsors, and volunteers of the Cherry Blossom Road Race for injury or illness, which may directly or indirectly result from my participation. I understand the risks for such a run and have trained adequately in preparation. I understand that my name and/or photograph(s) of my participation may be used for promotion and publicity purposes. **ENTRY FEES ARE NON-REFUNDABLE & NON TRANSFERABLE.**

Runner's signature _____ Date: _____
(Parent or Guardian if runner is under 18 years of age)

Payment information (Make checks payable to Ronald McDonald House Charities of Central Georgia)

Check enclosed Visa Mastercard AmEx Discover

Cardholder's Name: _____

Card Number: _____ Exp. _____ CVN: _____

Signature: _____

