

**5<sup>th</sup> ANNUAL JOYCE'S JOG 5K AND 1-MILE FUN RUN/WALK  
DONALSONVILLE/SEMINOLE COUNTY HARVEST FESTIVAL**

SATURDAY, OCTOBER 15, 2011  
PONDER ENTERPRISES, DOWNTOWN  
208 EAST 3<sup>RD</sup> STREET  
(CORNER OF HWY 84 & HWY 91)  
DONALSONVILLE, GA

REGISTRATION 6:30-7:15 AM  
RACE TIME:  
1-MILE 7:30 AM  
5K 8:00 AM

EARLY REGISTRATION \$20 IF POSTMARKED BY OCTOBER 08, 2011  
REGISTRATION \$25 OCTOBER 09 THRU RACE DAY  
PROCEEDS BENEFIT BREAST CANCER RESEARCH  
T-SHIRTS GUARANTEED TO ALL PARTICIPANTS WHO REGISTER BY 10/08

AWARDS: 1<sup>ST</sup>, 2<sup>ND</sup>, 3<sup>RD</sup> IN ALL AGE DIVISIONS  
AND 1<sup>ST</sup> OVERALL MALE AND FEMALE, MASTERS MALE AND FEMALE (40&OVER)  
GRAND MASTERS MALE AND FEMALE (50& OVER)  
SEMINOLE COUNTY MALE AND FEMALE

Age divisions: 14& under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, over 70  
**Finisher medals to children under 14 in the FUN RUN**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

e-mail \_\_\_\_\_

\_\_\_\_\_ 5K \_\_\_\_\_ 1-MILE T-SHIRT SIZE \_\_\_\_\_ NO SHIRT OPTION \$15 \_\_\_\_\_

**WANT TO BE A TEAM PLAYER?** Teams of 10 or more receive \$2 off. Applications must be sent together and must be postmarked by 10/08. The largest team will receive our team spirit award.

\_\_\_\_\_ **PHANTOM RUNNER:** (\$20 by 10/08 I'm taking the day off but I want to support breast cancer and receive a t-shirt!

\_\_\_\_\_ **VIRTUAL RUNNER:** (\$20 by 10/08 run where you are; submit your results, support breast cancer and receive a t-shirt! You will be listed in our results but not eligible for awards.

I waive any and all claims for myself and my heirs against officials and/or sponsors, the county of Seminole, the city of Donalsonville, the Donalsonville/Seminole County Chamber of Commerce, and the Harvest Festival Committee or the *JOYCE'S JOG* committee for injury or illness which may directly or indirectly result from my participation in the race. I further state that I am in proper physical condition to participate in this race.

\_\_\_\_\_  
PARTICIPANT'S SIGNATURE

\_\_\_\_\_  
PARENT /GUARDIAN IF UNDER 18 YRS

\_\_\_\_\_ BREAST CANCER SURVIVOR?

\_\_\_\_\_ CANCER SURVIVOR?

MAKE CHECKS PAYABLE TO *JOYCE'S JOG* AND MAIL TO JOYCE'S JOG,  
P. O. BOX 4512, DONALSONVILLE, GA 39845 FOR MORE INFORMATION VISIT [WWW.JOYCESJOG.COM](http://WWW.JOYCESJOG.COM)  
OR E-MAIL [INFO@JOYCESJOG.COM](mailto:INFO@JOYCESJOG.COM) OR CONTACT STEFFEY VINES AT 229-524-1234