

# Operation T-Bone Run Fun Walk/5K/10K

**Location:** Friendship Home Audubon, Iowa  
**Date:** Saturday, August 7, 2021

**Time:** 7:15 a.m. - 7:45 a.m. - Registration & Sign In  
 8:00 a.m. - Race Begins

**Fee:** 2 mi. Fun Walk \$10.00 (\$15/day of run)  
 5K run or 10K run \$15.00 (\$20/day of run)

(Registration fees are nonrefundable. All net proceeds will benefit the Friendship Home Foundation.)



The Friendship Home Foundation is a private 501(c)3 organization dedicated to securing and stewarding gifts and grants that benefit the Friendship Home, a long-term care facility where residents are cared for in a Christian setting of compassion and choice.

**Deadline:** July 16, 2021. No guarantee of race bag if registration is received after the deadline. Registration can be mailed in or dropped off at the Friendship Home front desk.

**Packet Pick Up:** Day of race 7:15 - 7:45 a.m. If pre-registered, you or a representative must be present at packet pick up to ensure a race bag.

**5K & 10K Awards:** Top 2 Male and Female Finishers in each age group

12 & under	20-29	40-49	60 & up
13-19	30-39	50-59	



Water stations will be along the route, and post-race refreshments will be available. Please check our website for course maps.

## 2021 Operation T-Bone Run

Make checks payable to Friendship Home Foundation and mail to Amy Madsen, Marketing Assistant, 714 N Division St., Audubon, IA 50025 or drop off at the Friendship Home front desk. Photocopies of the form are acceptable. One registration per form. For questions regarding the race, please contact Amy at 712-563-2651.

<b>Entry Fee:</b>		<b>Participant Information</b>	
_____ \$10 2 Mile Fun Walk	Name _____	Age as of 8/1/2021 _____	
_____ \$15 5K/10K	Address _____	Gender (M/F) _____	
_____ Donation to FH Foundation	City, State, Zip _____	Email _____	
_____ Total Enclosed	Phone _____		

### Waiver & Medical Authorization

In consideration of being permitted to participate in the Operation T-Bone Run, I, the undersigned participant (or, if under age 18, the participant's parent or legal guardian on his or her behalf): 1. Recognize and acknowledge that such activity may involve risk of bodily injury or property damage, 2. Assume full responsibility for and risk of any bodily injury, damage or loss which may occur as a result of participating in such activity, 3. Release, waive, discharge and covenant not to sue the Friendship Home Foundation and their administrators, officers, employees, members of governing and advisory bodies, representatives, agents, and volunteers (the "releases") from all liability to the undersigned for any and all damage or loss, and any claim or demand therefore, on account of injury to my person or property, whether due to negligence of the releases or otherwise, as a result of participating in any such activity, 4. Agree to indemnify and hold harmless the releases identified above from any and all loss, liability, damage or cost that they may incur as a result of my participation in any such activity, 5. In the event of any injury or illness while participating in such activity authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel, and 6. Consent to my picture being used for publicity or promotional purposes. I HAVE READ AND FULLY UNDERSTAND THIS WAIVER AND MEDICAL AUTHORIZATION AND VOLUNTARILY SIGN IT.

Signature of Participant (or legal guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_