



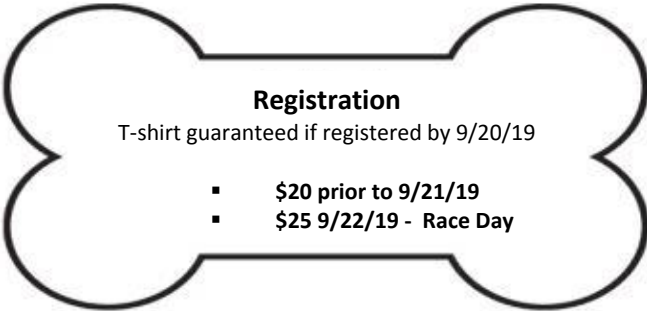
Zoey's Fun Run & 1 Mile Dog Walk

October 6th, 2019

John Rudy Park

Every year, pet owners who cannot afford medical care for their pets are forced to make incredibly difficult decisions. Depending upon their pet's condition, the cost of medical care can range from a few hundred to several thousand dollars. Zoey's Fun Run is a community event to raise money for Zoey's Fund; a special fund in partnership with the Pennsylvania Veterinary Medical Association. The fund assists York county pet parents who are in financial need, care for their pet for as long as they can; and not be placed in a position where they must say good-bye.

- Race will be held Rain or Shine at
John Rudy Park**
- 9:00 a.m.** Race Day Registration
 - 10:00 a.m.** 5K Fun Run Begins
 - 10:10 a.m.** 1 mile Dog Walk
 - 11:00 a.m.**
 - Walk of Fame
 - Basket Raffle
 - Blessing of the pets
 - Memorial Ceremony
 - Pictures with your Pet
 - Visit our vendors



Registration

T-shirt guaranteed if registered by 9/20/19

- \$20 prior to 9/21/19
- \$25 9/22/19 - Race Day

Dogs participating in the walk must be well behaved and must be on a leash. Owners are responsible for their dog's behavior.

For more information go to www.zoeyfunrun.org

Registration Information

Mail Registration forms to: Zoey's Fun Run, 1260 E. Canal Road, Dover, PA 17315

Checks can be made payable to: Zoey's Fun Run

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Sex: Male Female Date of Birth: ____/____/____ Age: _____

_____ I'm participating in the 5k Run _____ I'm participating in the 1 mile Walk

Shirt Size: Adult - S M L XL XXL (circle one) Are you bringing your dog _____

Waiver: In consideration of the furtherance of your purpose, objective, and work, and in consideration of your permitting me to participate in your "Run/Walk event on behalf of myself, my heirs, executors, administrators, and assigns, I hereby waive and release any and all rights and claims for damages which I may have against you, the municipalities through which the event will take place, as well as any other person connected with the event, their heirs, executors, administrators, successors, and assigns for any and all injuries which I may suffer while taking part in the event or as a result thereof.

Signature: _____ Date: _____

Parent/Guardian if under 18: _____ Date: _____