

Run for the Health of It 5K Run/Walk is a fundraising event sponsored by Excela Health Westmoreland Hospital Auxiliary benefiting common outreach programs in Westmoreland and surrounding counties.

The proceeds from the 2015 race will benefit Emergency Services in Westmoreland County, and allow us to support prehospital care providers as they make every second count for people having heart attacks, strokes and other life-threatening conditions.

Improving the health and well-being of everyone in our region is a community effort. The Westmoreland Hospital Auxiliary is proud to support our care providers across the continuum of care.

Among the auxiliary's most recent projects:

- Healing Garden for family and caregiver respite
- Digital Mammography for our Breast Health Centers
- Communication Boards for Nurse/Family Knowledge Exchange
- Therapeutic infant seats for newborns in crisis



Westmoreland Hospital Auxiliary
Run for the Health of It 5K
532 West Pittsburgh Street
Greensburg, PA 15601



Westmoreland Hospital Auxiliary's



1st Annual
Run for the Health of It
5k Walk/Run



Saturday, June 13, 2015
Lynch Field, Greensburg, PA
Registration begins at
7:30 a.m.

RACE TO BEGIN
9 a.m. – Runners
9:05 a.m. – Walkers

Funding Excela Health Westmoreland
Community Health Initiatives

GENERAL INFORMATION

The Course: This 5K run/walk will begin at Lynch Field in Greensburg, Pa., winding its way through town and ending at Lynch Field. The course is designed for both serious and amateur athletes of all ages and sizes. We will have staggered starts for runners and walkers.

Packet Pick Up: Participants may pick up their T-shirts and race day packets on race day beginning at 7 a.m. at the Kaufmann Pavilion, Lynch Field. T-shirts are not guaranteed for late registrations.

T-Shirts: Pre-registered participants will receive short-sleeved T-shirts with Run for the Health of It logo and race sponsors listed.

Chip Timing: This race will be chip timed by Miles of Smiles.

Entry Fees:

By May 13, 2015 - \$20
May 14 – Race Day - \$25

Make Checks Payable to:

WHA5K

and mail to:

Run for the Health of It 5K
c/o Westmoreland Hospital Auxiliary
532 West Pittsburgh Street
Greensburg, PA 15601

Or register online at

<http://www.active.com/greensburg-pa/running/distance-running-races/run-for-the-health-of-it-5k-run-walk-2015>

(Additional fee may apply for online registration)

For additional information email:
Runforthehealthofit5k@yahoo.com

AGE DIVISIONS MEN & WOMEN

14 & UNDER	14 – 19
20 – 24	25 – 29
30 – 34	35 – 39
40 – 44	45 – 49
50 – 54	55 – 59
60 – 64	65 – 69
70 and Over	

Awards: Awards will be given to the top 3 overall male and female and the top 3 male and female runners in each age group. There will be no duplication of awards.

The awards ceremony will take place at the Kaufmann Pavilion (Lynch Field) immediately after the race.

SPONSORSHIP OPPORTUNITIES

\$2,500 Diamond Sponsor – Large Company
Logo on the back of the shirt, media publication, four (4) race participants

\$1,500 Platinum Sponsor – Medium Company
Logo on the back of the shirt, media publication, two (2) race participants.

\$500 Gold Sponsor – Small Company logo
printed on the back of the shirt, media
publication, one (1) race participant.

\$100 Silver Sponsor – Company name printed on
the back of the shirt.

\$250 Mile Marker Sponsor (3 available) –
sponsor listed on mile marker (one per marker) for
miles 1, 2, and 3.

PARTICIPANT REGISTRATION

Name: _____

Address: _____

City: _____

State: _____ **Zip:** _____

Phone: _____

Email: _____

Age on Race Day: _____

Gender (Please Circle One): **Male** **Female**

Category (Please Circle One): **Walker** **Runner**

T-Shirt Size (Please Circle One):

S **M** **L** **XL**

I hereby waive all claims against the Westmoreland Hospital Auxiliary, Excelsa Health, the City of Greensburg, the Greensburg Volunteer Fire Department, and their respective members, employees, agents, servants, as well as any and all other persons and/or entities associated with the Run for the Health of It 5K race for any and all claims that I (or my child) may suffer while participating in this event. I attest that I am (or my child is) physically fit and prepared for this event. I understand and assume all risks associated with participating in this event, including, but not limited to: falls, contact with other participants, the effects of weather, traffic and the condition of the course.

Signature: _____

**Signature of parent/guardian if runner/
walker is under 18 years of age:**
