



Sixth Annual 5K Flight Fundraiser!

Peer Run/Walk for Mental Health Recovery & Wellness

This event is run by and for people with lived experience in all stages of recovering our mental health and freedom from trauma and addictions....and for our allies.

Sunday, October 1st, 2017

Jamaica Pond Boathouse in Jamaica Plain, MA

The Transformation Center 5k Flight is back for a 6th year!

Join our campaign to promote exercise as a tool in recovering and sustaining "whole health".

*People with mental health, trauma, and addiction histories face health challenges related to side effects from medications, poverty and lack of access to medical care. We invite everyone to take charge of caring for mind, body and spirit. Join us for a day of fun at the pond! **16 and under FREE***



ASL Interpreters requested

9:30 AM - Registration/Package Pickup

10:30 AM - Inspirational Remarks

11:00 AM - Race/Walk Start

T-Shirt for the first 200 people who register

Snacks

Medal for finishing the course

Online Registration: \$25 www.racemenu.com/TC5K-Flight

Race-day Registration: \$30

\$25 not the right amount for you? Register at

https://www.surveymonkey.com/r/5KFlight_Scholarship

or Mail whatever amount you decide \$0- \$1000

98 Magazine Street Roxbury MA 02119
(Must be postmarked by September 22nd)

Go to our website to become a Sponsor www.transformation-center.org

5kflight@transformation-center.org ~ 617-442-4111

The Transformation Center is a 501(c) 3 nonprofit organization

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Peer Run/Walk for Mental Health Recovery & Wellness

Mail-in Registration Form

Make Checks Payable To: The Transformation Center

Mail Entry To: The Transformation Center, 98 Magazine Street, Roxbury MA 02119

NAME	GENDER (OPTIONAL):
ADDRESS	
CITY	STATE
ZIPCODE	EMAIL
PHONE	AGE ON RACE DATE
PROGRAM, AGENCY OR CLUB I AM FROM (OPTIONAL):	T-SHIRT SIZE:

- I AM (CIRCLE ONE) RUNNING WALKING**
- REGISTRATION FEE: \$25 (Recommended)**
 - OTHER AMOUNT: \$ _____**
 - I WILL PAY AT THE EVENT**
 - FREE FOR KIDS UNDER 16!**

Waiver Must Be Read and Signed Before Mailing:

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and cross country trail and traffic including foot traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release The Transformation Center and all sponsors, their representatives and successors from all claims of liabilities of any kind, including any claims arising out of negligence of the aforementioned parties, arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

Signature	Date	Parent's Signature if under 18 or Guardian's Signature if applicable
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