



## *Mission Statement*

Hemophilia Outreach Center is dedicated to providing expert, specialized medical care and advocacy for persons with a bleeding disorder.

We create and implement programs that educate, empower and enrich the bleeding disorder community. Our services are designed to enhance our holistic vision of each person as whole and complete.

[www.hemophiliaoutreach.org](http://www.hemophiliaoutreach.org)

(800) 992-6026 (toll free)  
(920) 965-0607 (FAX)  
(920) 965-0606  
Green Bay, WI 54311-5622

Center

Hemophilia Outreach



HEMOPHILIA  
**OUTREACH**  
CENTER  
*The bridge to a better life*



2nd Annual  
5 K  
Walk / Run



September 22, 2012

Saturday ~ 8:00AM

# Hemophilia Outreach Center

## 2nd Annual Walk/Run

This event was inspired by a desire to honor our loved ones who have passed away within our bleeding disorder community.

In doing so, we would like to develop a garden & memorial walk made up of individual bricks. These may be with the names of our loved ones who have passed, as well as the people of our active community and families.

To help offset the cost of this walk, we are

“Walking For The Walk”.

Hemophilia Outreach Center  
2nd Annual  
5K Walk/Run  
Saturday, September 22, 2012  
8:00AM



HEMOPHILIA  
OUTREACH  
CENTER  
*The bridge to a better life*

All monies raised will go for the HOC Garden/Memorial Walk. Custom Memorial bricks can be purchased after January 2013.



# 2nd Annual

## 5K Walk / Run Registration Form

Entry Fees:

\$12 Single, \$25.00 Family

[Day of Race: \$15.00 Single, \$30.00 Family]

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

E Mail: \_\_\_\_\_

Date of Birth: \_\_ / \_\_ / \_\_ Gender: \_\_ M \_\_ F

Signature: \_\_\_\_\_

Waiver Release: AGREEMENT, WAIVER, RELEASE AND ACKNOWLEDGEMENT: I acknowledge that it is my responsibility to understand the risks and determine whether I am fit to safely participate in this event and the precautions I should take. I hereby assume full responsibility for my safety and health during this event. I hereby, for myself, my heirs, guardians and personal representatives, forever release, hold harmless, and discharge the Hemophilia Outreach Center, its sponsors, directors, volunteers, municipal agencies and beneficiaries, and all other persons and entities associated with the event, (collectively, the "Organizers"), from and against any and all rights and claims for injuries or damages I may sustain or receive arising in any manner from my participation in the event, regardless of whether such injuries or damages result from the negligence of the Organizers. I recognize that the event takes place on an open road and bike trail, and regardless of Organizers' efforts to control traffic, I am responsible for my own safety when participating in this event, including interacting with moving vehicles. I grant permission to the Organizers to use my name and photograph in brochures and other promotional media without compensation.