



5K Rainbow Run and Family Fun Day

Saturday, April 22nd 9 am to 2 pm

Coweta County Fairgrounds

April 22, 2017 will be a day to celebrate our Angel Abby
and bring families together for a day of fun!

April is organ donation awareness month.

Please join us as we honor Abby's gift of life on Christmas Day 2012.

The event will begin at 9:00 am with an energetic warm-up, followed by the National Anthem and Invocation. The 5K Rainbow Run will start shortly thereafter, with lots of COLOR! After the run, we will continue the celebration until 2:00 pm with Music, Food, Games, and a Raffle. It will be a day to bring smiles and laughter to all - two things Abby loved to do: Smile and Laugh!

**Registration at Active.com, or on site the morning of the run,
or by submitting this form with your payment.**

ALL PROCEEDS go to Abby's Angels Foundation.

This is a non-timed fun run for all ages and abilities! Strollers are allowed,
but please no pets. Event will take place rain or shine.

Please wear your race shirt or another white shirt
to best display your RAINBOW!

Packet pick up: Friday, April 21, 3-7:30 pm,
Stonebridge neighborhood clubhouse,

35 Stonebridge Crossing, Newnan, GA 30265

OR Saturday, April 22, at the event site beginning 7 am.

Abby's Angels Foundation

5K Rainbow Run Registration Form

Fill out this form completely. Signature is **REQUIRED**.

Mail entries to:

Abby's Angels Foundation Rainbow Run
PMB 154
1741 Newnan Crossing Blvd East, Suite O
Newnan, GA 30265

Online registration at: **Active.com** - search Abby's Angels Rainbow Run

Last Name: _____

First Name: _____

Age (required): _____ Gender: oM oF

Daytime phone: _____

Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact

Name: _____

Phone: _____

ENTRY FEES through 4/15/17

Children under 3 are free (no race shirt)

\$15 for children ages 3-12 yrs.

\$30 for everyone 13 yrs. and older

\$5 price increase in both age groups after 4/15

Registrations received after 4/15 are not guaranteed a race shirt.

Make checks payable to: **Abby's Angels Foundation**

PLEASE SELECT YOUR SHIRT SIZE

Youth S M L

Adult S M L XL 2XL

In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against officials and sponsors of Abby's Angels 5K Rainbow Run & Family Fun Day for illness or injury which may result directly or indirectly from my participation. I further state that I am in proper physical condition to participate in this event. I also give permission for the use of my name and/or picture in any public account of this event.

Signature or Signature of Parent or Guardian (if under 18)

Date

I cannot be at the Abby's Angels Rainbow Run but would like to make a donation to Abby's Angels Foundation in the amount of \$_____.

OFFICE USE ONLY, DATE REC'D: _____

www.abbysangelsfoundation.org

EIN: 46-4250478