



COLORS OF COURAGE 5K

COLOR RACE

SATURDAY, AUGUST 28

GARFIELD HOUSE • PIKEVILLE, KY

7:30AM REGISTRATION • RACE STARTS AT 9AM

\$25 early registration • \$30 day of race

REGISTRATION FORM* (PLEASE PRINT)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Age on Race Day: _____ Birth Date (MM/DD/YY): _____

Sex: Male Female

Age Group: 14 & Under 15-19 20-29 30-39 40-49 50-59 60-69 70+

PAYMENT OPTIONS

Cash Credit Card

Check (checks should be made payable to **PMC Foundation for Quality Healthcare, Inc.**)

Name on Card: _____ Card Type: _____

Credit Card Number: _____ Exp.: _____ CID Code: _____

Signature: _____

Amount: _____