



"One love refers to the universal love and respect expressed by all people for all people"

## 2011 One Love, One Heart

### A 5K Walk/Run benefiting the CdLS Foundation

**December 3, 2011 | 10:00 a.m.  
Medlock Park, Decatur, GA**

874 Gaylemont Cir  
Decatur, GA 30033

**RACE DETAILS:** 5K walk/run benefits the Cornelia de Lange Syndrome Foundation and research facilities. Race begins at 10:00 am, rain or shine at Medlock Park in Decatur. Delicious refreshments available. Great playground for kids to play. [www.cdlsusa.org](http://www.cdlsusa.org) Register to walk or run. If you are unable to participate, register as a Phantom Runner to support CdLS with your tax deductible contribution.

**AGE GROUPS/AWARDS:** Overall M & F runners, Masters M & F runners & top three M & F finishers in each category: 14 & under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59 & over 60.

**REGISTRATION FOR 5K RUN/WALK OR PHANTOM RUNNER:**

- \$20 if received by 11/26; late and race day registration = \$25
- Register online – [www.active.com](http://www.active.com)
- Download form and mail race entry – [www.running4fitness.com](http://www.running4fitness.com)
- Race Day registration in beginning at 8:45 a.m.
- Make checks payable CDLS Foundation, mail to Jen Pomfret, 744 Avery St, Decatur, GA 30030

**T-SHIRTS:** Guaranteed long sleeve T-shirts for all pre-registered runners; while supplies last for on-site registrants.

**RACE INFO:** Ed Williams, Race Director | 404-327-7738 | [roadraceservices@comcast.net](mailto:roadraceservices@comcast.net)

**SPONSOR INFO:** Jen or Jim Pomfret | 404-228-3915 | [pomfretj@comcast.net](mailto:pomfretj@comcast.net)

### ENTRY FORM – 2011 One Heart, One Love 5K Run/Walk

Circle Event: 5K Run 5K Walk Phantom runner

Checks payable to CDLS Foundation, mail to Jen Pomfret, 744 Avery St, Decatur, GA 30030

T-Shirt (circle): Small Medium Large X-Large

Enclosed is my registration fee of \$ \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ GENDER [ ] M [ ] F

E-MAIL \_\_\_\_\_ PHONE \_\_\_\_\_

Waiver: In consideration and acceptance of this entry to the CdLS Awareness Run/Walk. I waive any and all claims for myself and my heirs and assigns on the officials and sponsors of the race for any injury or illness that may result from my participation. I realize this is a physical event which requires proper physical health. In the event of severe weather conditions, the race will be cancelled and your entry fee will be considered a donation.

\_\_\_\_\_  
Signature of participant /Parent or guardian's signature if under 18 years of age

\_\_\_\_\_  
Date

***Running4Fitness.com***

