

# Saturday • June 20, 2009

7:30 a.m., 4-mile Run 8:30 a.m., 1-mile Walk

Please join us for the 26th Annual Magnolia Run!

A four-mile run or one-mile Fun Run/Walk to benefit the
Epilepsy Foundation of Georgia.

# **Presenting Sponsor**



The Epilepsy Company

#### Thanks to our sponsors!

Assurance America Corporation
Bank of North Georgia • Synovus • Chatham Capital
Beck • Dasani • Launch Atlanta
Firebirds • PFIZER • Fleet Feet • Perimeter Mall

Location: Perimeter Mall
4400 Ashford Dunwoody Road
Atlanta, Georgia
For information visit: <a href="https://www.epilepsyga.org">www.epilepsyga.org</a>
or call Pam Murphy at 404-527-7155

Type □Visa □MC □Discover □AMEX

## SIGN UP

Online: www.active.com (through June 18th, 2009)

By Fax: 404-564-3034 (through June 12th, 2009)

In Stores: Fleet Fleet (Sandy Springs/Duluth

only), through Thursday, June 18th

By Mail: 6065 Roswell Road, Suite 515

Atlanta, GA 30328

(must be postmarked by Friday, 6/12/09)

In Person: On race day beginning at 6:30 a.m.

#### **RAISE MONEY!**

Ask friends or family members to support your run

#### **RUN (OR WALK)!**

Awards will be given for overall male, female and masters winners, and the top three in various age groups. All participants will receive a Magnolia Run t-shirt. Run starts at 7:30 a.m. RAIN OR SHINE.

## **FEEL GREAT!**

Knowing you helped a worthy cause.

#### **Registration Fees**

\$20 pre-registration (through 6/12/09 by mail; faxed or online by 6/18/09 with credit card) \$25 Race Day

\$15 (ages 12 and under)

Race information contact Pam Murphy at 404-527-7155

#### **Parking**

Available at the north end of Perimeter Mall

# REGISTRATION

_ast Name	First Name	Age Sex M F (circle one) Race 4-mile 1-mile  *T-shirt size (circle one) S M L XL **XXL YC	DUTH: S M
City	StateZip	*Preregistered runners only. **\$2 addit —	ional fee.
-mail		Emergency Contact & Phone	epilepsy foundatio georgia
May we contact you about	other EFGA events?	Waiver: I hereby waive all claims against the Epilepsy Foundation of	of Georgia staff.

**Waiver:** I hereby waive all claims against the Epilepsy Foundation of Georgia staff, volunteers and event sponsors for any injury I might suffer in this event. I attest that I am physically fit and prepared for the event. I grant full permission for organizers to use photographs of me and quotations from me in legitimate accounts and promotion of this event.