

Kick Butts 5K Hope Is Stronger Than Cancer
Old Hancock County High School
418 Harrison St., Sneedville, TN 37869, Sneedville, TN
11/1/2025

9:00 am. Join the Hancock County Health Department for a 5K Run/Walk along the beautiful Clinch River to support the Hope for Hancock Cancer Fund. The 5K will start and finish at the old Hancock County High School.

The 5K be electronically timed by We Run Events.

T-shirts guaranteed for pre-registered entries by 10/15/25.

Pre-registration: \$12 (ends 10/31/25)	 Regular \$12 Registration:
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Make checks payable to: Hope for Hancock

Mail this form to: Hope for Hancock or **Drop off at:** Hancock County Health Department
288 Jarvis Street 178 Willow Street
Sneedville, TN 37869 Sneedville, TN 37869

Headphones are permitted on the course | Strollers are permitted on the course

For more info contact: Sonya Winkle, sonya.a.winkle@tn.gov , 423-733-2228	5K Run/Walk Timed Male & Female Awards:
	Top Overall Top Masters Top Age Groups (Top 3) 10 under, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 over.

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LAST NAME _____ FIRST NAME _____ M.I. _____

SEX ____ DATE OF BIRTH ____ / ____ / ____ AGE ON RACEDAY ____ E-MAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (_____) _____ - _____

RACE DAY EMERGENCY CONTACT (NAME AND PHONE) _____

*** **CIRCLE EVENT:** 5K Run/Walk Timed | 5K
Walk Untimed

*** **CIRCLE SHIRT SIZE:** YS, YM, YL, SM, MD, LG, XL,
1X, 2X, 3X 4X

IN CONSIDERATION FOR ACCEPTING MY ENTRY IN THIS RACE, I FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE AND RELEASE FOREVER ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I MAY HAVE AGAINST THE ORGANIZERS AND SPONSORS OF THIS EVENT. I ALSO RELEASE THE ABOVE NAMED FOR ALL CLAIMS OF DAMAGE DEMANDS, AND ACTIONS IN ANY MANNER DUE TO ANY PERSONAL INJURIES, PROPERTY DAMAGE, OR DEATH SUSTAINED AS A RESULT OF MY TRAVELING TO AND FROM AND MY PARTICIPATION IN SAID RACE. I ATTEST AND VERIFY THAT I AM PHYSICALLY FIT AND HAVE SUFFICIENTLY TRAINED FOR THE COMPETITION OF THIS EVENT. IN FILLING OUT THIS FORM, I ACKNOWLEDGE I HAVE READ AND FULLY UNDERSTAND MY OWN LIABILITY AND ABILITY.

SIGNATURE _____ DATE ____ / ____ / ____ (Parent signature if under the age of 18)

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