



Registration Form
Saturday, April 4, 2026
At the Ronald McDonald House



REGISTRATION INFORMATION –
runsignup.com/Race/GA/Savannah/RedShoesRun
 \$25 – Until March 28th
 \$30 – April 13th – April 3rd
 \$35 – Race Day

RACE DAY – SATURDAY, April 19th

7:30am - 8:40am – Check in and Final Packet Pick Up
 8:30am - Kids ¼ Mile Fun Run
 8:45am – 5K Race Start Time

PACKET PICK-UP INFORMATION

Friday, April 3rd at the Ronald McDonald House
 8:00am – 6:00pm

SLEEP IN FOR FAMILIES - \$35

<https://runsignup.com/Race/Events/GA/Savannah/RedShoesRun>

AGE CATEGORIES

- 9 years old & under
- 10-19 years old
- 20-29 years old
- 30-39 years old
- 40-49 years old
- 50-59 years old
- 60-69 years old
- 70 years old & up

First:	Last:	H-Ph:
Email:		C-Ph:
Street:		
City, State, Zip:		
Date of Birth:	Age on Race Day:	
Gender: Female Male		
<p>Please make checks payable & mail to:</p> <p>RMHC c/o Bill Sorochoak / Red Shoes Run 4710 Waters Ave Savannah, GA 31404</p>	Check #: _____ Name on Check: _____ Check Amt.: \$ _____ Check Covering Other Names: _____	

For additional information contact – Janet Kolbush @ janet@rmhccoastalempire.org



RED SHOES RUN
Not Your Average 5K
Waiver Form
Saturday, April 4, 2026



Waiver & Release of Claims

I understand that my consent to these provisions is given in consideration for being permitted to participate in this Event. I further understand that I may be removed from this competition if I do not follow all the rules of this Event. I am a voluntary participant in this Event, and in good physical condition. I know that this Event is a potentially hazardous activity and I hereby assume full & complete responsibility for, and for the risk of, any injury or accident that may occur during my participation in this Event or while on the premises of this Event.

I hereby release and agree to hold harmless Ronald McDonald House Charities®(RMHC)® of the Coastal Empire, its sponsors, the participants, the officers, the directors, representatives, agents, volunteers, and employees (the "Releases") from any and all liability, loss, claims, and demands, that may arise from any loss, damage, or injury (including death to my person) resulting from or arising in connection with this Event, or my participation in this Event, including my practice or preparation therefore, or while entering or departing from any premises owned by or leased on behalf of any Releases. I understand all risks associated with such Event and accept all risks and danger to my property and myself, regardless of whether I am participating or assisting in this Event voluntarily. I acknowledge and understand that in participating, I am relying totally upon my own judgment, abilities and skills, and hereby assume all risks of loss, damage, injury (including death) whether or claims be caused by falls, contact with animals, conditions of the premises of the Event, negligence of the Releases, risks not known to me or not reasonably foreseeable at this time.

By signing this agreement, I hereby state that I fully understand all terms of the release, that I release and hold harmless all Releases, and that I consent to all risks inherent in this Event.

Photographic Release

I give my full consent & permission for any purpose whatsoever and without compensation and assign the irrevocable right to use any photographs, video, audio of me that are made during the course of this Event.

I understand that I have given up substantial rights by signing this Release, and I have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent allowed by law.

PRINT Participant Name

Signature

Parent/Guardian if under 18

Date