

January 5, 2024

Town of Ridgeway
 PO Box 24
 Ridgeway, SC 29130

178 US Highway 321 Bypass N
 P.O. Box 388
 Winnsboro, SC 29180
 Phone: (803) 635-2335
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www.fairfieldbhs.org

To Whom It May Concern:

We are excited to announce that Fairfield Behavioral Health Services will host its **24th Annual 5K Run/Walk** event for **Alcohol Awareness Month** on **Saturday, April 20, 2024**. We look forward to increasing awareness about alcoholism and its negative impact on individuals, families, and the community. *Prevention, treatment, and recovery work!* What a wonderful opportunity for fun and unity towards a single cause that impacts most, if not all families.

Sponsorships and donations from local businesses and organizations are critically important and greatly appreciated. Rising costs of goods and services to host this community event make **tax-deductible contributions** like yours that much more essential to maintain an affordable registration fee for our community. Therefore, we have increased our sponsorship levels. **The deadline for contributions is March 22, 2024**, to ensure that your company's name is listed on the t-shirts. Please let us know if we can count on you for one of the sponsorship levels below.

Signature	\$1000	Company name and logo on 5k t-shirt, public recognition, <i>5 FREE run or walk entries with t-shirts</i>
Platinum	\$500	Company name and logo on 5K t-shirt, public recognition, & <i>3 FREE run or walk entries with t-shirts</i>
Gold	\$400	Company name and logo on 5K t-shirt, public recognition, & <i>2 FREE run or walk entry with t-shirt.</i>
Silver	\$300	Company name and logo on 5K t-shirt, 1 t-shirt and public recognition, & <i>1 FREE run or walk entry with t-shirt.</i>

This event has grown over the years receiving consistent and tremendous participation from community residents and others. Our 23rd 5K in 2023 (*3 years after the COVID19 Pandemic*) included a total of 124 participants, including 11 runners and 113 walkers. ***That's 124 people advertising a cause and sponsors for many years in many places!***

Checks can be mailed and made payable to: ***Fairfield Behavioral Health Services, Attn: 5K Run/Walk, P. O. Box 388, Winnsboro, SC 29180.*** If you have any questions, feel free to contact our office at (803) 635-2335 or me at Veronica Edmonds ext. 12.

Sincerely,

Veronica D. Edmonds

Veronica D. Edmonds, Director of Prevention Services (*Race Coordinator*)

cc: Vernon L. Kennedy Sr., Executive Director

24th Annual 5K Run/Walk – Saturday, April 20th, 2024

In honor of **Alcohol Awareness Month**, this annual public event raises awareness about the dangers and negative impact of **alcohol abuse** and **underage drinking** that affects individuals, families, and the community.

COURSE: Run – 3.1 miles or Walk –1.8 miles passing through the scenic and historic neighborhood of Winnsboro

REGISTRATION: www.fairfieldbhs.org · www.strictlyrunning.com · **Mailing Address:** P. O. Box 388
Physical Address: 178 US Highway 321 Bypass N., Winnsboro, SC 29180

DEADLINE: Team and individual early registration deadline is Thursday, April 18th, 2024 at 7:00 p.m.
Late registration fees will apply after that day.

Entry fees are **NON-TRANSFERABLE** and **NON- REFUNDABLE**



6:30AM-7:30AM ~ Individual Late Registration, Race Tag, & Recording Chip
7:35AM ~ Welcome, Emcee, & Review Race Rules
8:00AM ~ 3.1 Mile Run
8:05AM ~ 1.8 Mile Walk
10:00AM ~ Finish Line Celebration

AGE CATEGORY & AWARDS: Overall male and female finishers. Top 3 male and female finishers in each category except the new 80+. Overall winners are not eligible for age-category awards.

Call **(803) 635-2335** for more information • Detach and return bottom registration form

24th Annual 5K Run/Walk



Please check all that apply.

Run Walk Individual OR Team (5 or more): Team Name _____

Team & Individual Early Registration Deadline is 7:00 pm Thursday, April 18th

First Name _____ MI _____ Last Name _____ Sex _____ Age on Race Day _____ Address _____
City _____ State _____ Zip Code _____

Phone () _____ Email Address (To receive future registration forms): _____

Entry Fees (NON-TRANSFERABLE and NON-REFUNDABLE) **T-shirt Sizes (with each entry while supplies last)**

Early Registration: Individual...\$15 Small Medium Large X-Large XX-Large XXX-Large
Team Registration...\$10 per person Small Medium Large X-Large XX-Large XXX Large

Late Registration: Individual Only...\$18 Small Medium Large X-Large XX-Large XXX-Large

Liability Waiver and Release: In consideration of the acceptance of the entry, I, my heirs, personal representatives, and assigns do hereby release the sponsors, race workers, and officials of this race from any liability arising from illness, injuries, or other damages I may suffer as a result of participation in such event. I affirm that I am physically able and have sufficiently trained for participating in this event and I am aware that participation in this event could result in severe physical soreness or injury. I understand that the entry fee is non-refundable and non-transferable. Should race officials determine that completion of this event would be injurious to my health, I consent to being removed from the course and treated by the medical personnel in attendance or at their direction. I consent to being photographed and picture(s) to be used in public relations efforts of Fairfield Behavioral Health Services.

Date _____ Participant Signature _____ Parent/Guardian Signature _____