

**VIRTUAL**

**2020  
5K Run & Walk  
for Meals on Wheels**

**ANY TIME • ANY PLACE**  
between  
**June 1-June 30, 2020**

**NEW FOR THIS YEAR**

**Virtual 5k Run & Walk**

to benefit OPC's Meals on Wheels

an essential program that provides DAILY meals  
for homebound seniors 7 days a week.

**EVERY \$5 RAISED =  
ONE HOME DELIVERED MEAL!**

Register by **JUNE 1**  
to receive a T-shirt.

Curbside T-shirt pick up will take place  
on Friday, June 5, from 7 a.m. to 8 p.m.  
at the OPC covered entrance.

*Presenting Sponsor*

**PIXLEY**  
FUNERAL HOME

Dignity<sup>®</sup>  
MEMORIAL  
LIFE WELL CELEBRATED<sup>®</sup>

*Supporting Sponsors*

American  
House  
SENIOR LIVING COMMUNITIES

**hap**

Pomeroy  
Living

PARTICIPANT'S FIRST/LAST NAME	SEX	AGE	T-SHIRT SIZE			FEE
	<input type="radio"/> F <input type="radio"/> M		<input type="radio"/> YOUTH <input type="radio"/> LARGE	<input type="radio"/> SMALL <input type="radio"/> X-LARGE	<input type="radio"/> MEDIUM <input type="radio"/> 2X-LARGE (Add \$2)	<input type="radio"/> \$25
	<input type="radio"/> F <input type="radio"/> M		<input type="radio"/> YOUTH <input type="radio"/> LARGE	<input type="radio"/> SMALL <input type="radio"/> X-LARGE	<input type="radio"/> MEDIUM <input type="radio"/> 2X-LARGE (Add \$2)	<input type="radio"/> \$25
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ENTRY FEE TOTAL \$ \_\_\_\_\_

ADDITIONAL DONATION (if desired) \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Enclosed is my check (# \_\_\_\_\_) payable to OPC in the amount of \$ \_\_\_\_\_

Please charge my registration to:  Visa  Mastercard  Discover

Card #:     -     -     -     Exp. Date: \_\_\_\_\_

Name on card (if different from registrant) \_\_\_\_\_

WAIVER: In acceptance of my registration for OPC's 5K Run & Walk, I hereby release OPC and all participating groups, sponsors and persons officially connected with this event from any and all injury or damage whatsoever from my participation. Signature of applicant or parent/legal guardian (if under 18 years of age):

NAME \_\_\_\_\_ DATE \_\_\_\_\_

MAIL OR EMAIL REGISTRATION FORM TO: OPC, 650 Leticia Drive, Rochester, MI 48307 or opcseniorcenter.org

**For more information on registration or additional payment options, call (248) 608-0268.**