



# Arabella Health & Wellness 11<sup>th</sup> Annual GET FIT SELMA! 2024 HEALTHFEST - Street Olympics - MGLC Carnival

Selma Alumnae Chapter of Delta Sigma Theta Sorority, Inc.  
& McRae-Gaines Learning Center

Saturday, October 19, 2024, 8AM-3PM  
McRae-Gaines Learning Center, 1101 Woodrow Ave, Selma AL 36701  
[www.mglcselma.com/GFS-24](http://www.mglcselma.com/GFS-24)

## ABOUT THE DEFEAT DIABETES 5K & COMMUNITY FUN RUN/WALK **ADULT INDIVIDUAL or TEAM REGISTRATION**

The 5K Run/Walk course will begin at 8:00 am sharp. The 5K will start at McRae-Gaines Learning Center (MGLC) will continue through nearby neighborhoods and return to the Center.

**1-Mile Community Fun Run & Walk** will begin at 8:15 am with clearly marked returns to the Start/Finish lines

**Tot Trot** for children 5 years old and under will begin after the Fun Run. FREE registration plus prizes.

**Animals on a leash and children in strollers or walking welcome for the Fun Run/Walk!**

**ONLINE REGISTRATION:** Register at <http://www.mglcselma.com/GFS-24>

**RACE DIRECTOR:** Bill Hamm, [hammbill@hotmail.com](mailto:hammbill@hotmail.com), 512-750-5894 (Text)

- ★ **PACKET PICK-UP:** Thursday, October 17, 2024, 9:00 am – 3:00 pm, McRae-Gaines Learning Center, 1101 Woodrow Ave.
- ★ **ON-SITE REGISTRATION/PACKET PICK-UP:** Saturday, October 19, 2024, 7:00 am -7:45 am, McRae-Gaines Learning Center, 1101 Woodrow Ave., Selma AL
- ★ **T-shirts available to first 100 entrants for both events. Enter NOW to secure your Get Fit Selma! T-shirt**
- ★ **Rain or shine – no rain date.**

**PARKING:** Parking available at 1101 Woodrow Ave. at the school or on the street.

**AWARDS:** Awards to the following divisions: \$100 for 1<sup>st</sup> overall M/F, Nike gear for 1<sup>st</sup> Master M/F (50 and above); Medals by Age group: five-year increment starting with 14 and under to 70+

**Mail-in registrations** must be postmarked by Tuesday, October 15, 2024.

### ADULT FEES – Individual & Team – 5K Run & Fun Run/Walk

- 5K ADULT Individual Rate = \$30
- ADULT 1-Mile Community Fun Run/Walk = \$10
- 5K Run/Walk Adult Team of 5 or more, \$20 per adult runner.
- 1-mile Run/Walk Adult Team of 5 or more, \$8 per adult runner/walker.

**MAKE CHECKS PAYABLE TO:** McRae-Gaines Learning Center (MGLC)

Mail registration form to: Mrs. Angie McCary, McRae-Gaines Learning Center, PO Drawer 1266, Selma, AL 36702-1266

Must be postmarked by Tuesday, October 15, 2024 – Otherwise please register on site. Phone 334-872-8078.

NAME: \_\_\_\_\_ LAST NAME \_\_\_\_\_ DOB: \_\_\_\_\_

Age on race day \_\_\_\_\_ Gender: (circle) F \_\_\_\_\_ M \_\_\_\_\_

ADDRESS: \_\_\_\_\_ T-SHIRT (circle) Youth Adult - XS S M L XL XXL XXXL

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: (\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the McRae-Gaines Learning Center, and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Alabama.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT to certify that his or her son/daughter/ward has permission to participate in the Event.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_



# 11<sup>th</sup> Annual GET FIT SELMA! 2024

## HEALTHFEST & Street Olympics

Selma Alumnae Chapter of Delta Sigma Theta Sorority, Inc.  
McRae-Gaines Learning Center, Inc.

Saturday, October 19, 2024, 8AM-2PM

McRae-Gaines Learning Center, 1101 Woodrow Ave, Selma AL 36701

[www.mglcselma.com/GFS-24](http://www.mglcselma.com/GFS-24)

**5K ADULT Runners & Walkers - \$20 (5K) and \$8 (1-Mile); Individual \$25 (5K) and \$10 (1-Mile)**

<b>SCHOOL:</b>		<b>COACH/TEAM CAPTAIN!</b>
<b>WORK PHONE:</b>		<b>CELL PHONE:</b>
<b>FAX:</b>		<b>EMAIL:</b>
<b>NO. of ADULTS RUNNING:</b>		<b>NO. of ADULTS WALKING:</b>
<b>FEES: ADULT Teams</b> <b>Team of 5 Runners/Walkers or more in the 5K .....\$20.00 each</b>  <b>Team of 5 Walkers or more in 1-Mile Fun Run/Walk.....\$8.00 each</b>		<b>Individual Pricing:</b> <b>5K Run/Walk: All ADULTS 22 yrs old &amp; older OR non-Students over 18 yrs old..... \$25.00</b>  <b>1 Mile Fun Run/Walk: All ADULTS 22 yrs old &amp; older OR non-students.....\$10.00</b>

\*T-SHIRT Youth Adult - XS S M L XL XXL XXXL

Walk or Run	Name	Age on Race Day	Gender M/F	Cell Phone	Email	*T-Shirt Size	**Runners Signature – or Parent (Read Waiver Below)

**MAKE CHECKS PAYABLE TO:** McRae-Gaines Learning Center; Mail to: Mrs. Angie McCary, McRae-Gaines Learning Center, PO Drawer 1266, Selma, AL 36702

Must be postmarked by Tuesday, October 4, 2024– Otherwise please register on site. Phone 334-872-8078.

**\*\*WAIVER:** In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the McRae-Gaines Learning Center, the sponsors, and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Alabama. **I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT** to certify that his or her son/daughter/ward has permission to participate in the Event. Parent or Coach Signature \_\_\_\_\_ Date \_\_\_\_\_ (Must be turned in by Tuesday, October 15, 2024.)



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[www.mglcselma.com/GFS-24](http://www.mglcselma.com/GFS-24)

## ABOUT THE DEFEAT DIABETES 5K & COMMUNITY FUN RUN/WALK **STUDENT REGISTRATION**

**STUDENTS** are defined as any person in school between 13 and 21 years-of-age.

The 5K Run/Walk will begin at 8:00 am sharp. The 5K will start at McRae Learning Center and will continue through nearby neighborhoods and return to the Campus.

**1-Mile Community Fun Run & Walk** will begin at 8:15 am with clearly marked returns to the Start/Finish lines  
**Animals on a leash and children in strollers or walking welcome for the Fun Run/Walk!**

**ONLINE REGISTRATION:** Register at <http://www.mglcselma.com/GFS-24>

**RACE DIRECTOR:** Bill Hamm, 512-750-5894 (Cell/Text) or hammbill@hotmail.com.

- 5K Student Runner or Walker, \$20 each runner.
- Student Community Fun Run/Walk, \$10 each runner
- 5K Student Team of 5 or more, \$15 each runner.
- Student Community Fun Run/Walk Team of 5 or more: \$8 each runner or walker

**MAKE CHECKS PAYABLE TO:** McRae-Gaines Learning Center or MGLC

Mail registration form to: Mrs. Angie McCary, McRae-Gaines Learning Center, PO Drawer 1266, Selma, AL 36702  
*Must be postmarked by Tuesday, October 15, 2024 – Otherwise please register on site. Phone 334-872-8078.*

NAME: \_\_\_\_\_ LAST NAME \_\_\_\_\_ DOB: \_\_\_\_\_

Age on race day \_\_\_\_\_ Gender: (circle) F \_\_\_\_\_ M \_\_\_\_\_

ADDRESS: \_\_\_\_\_ T-SHIRT (circle) Youth Adult - XS S M L XL XXL XXXL

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: (\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the McRae-Gaines Learning Center and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Alabama.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT to certify that his or her son/daughter/ward has permission to participate in the Event.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

(Parent's or guardian signature if under 18)



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[www.mglcselma.com/GFS-24](http://www.mglcselma.com/GFS-24)

**Team 5K STUDENT Runners & Walkers: \$15.00 (5K) and \$8 (1-Mile); Individual Students: \$20 (5K) and \$10 (1-Mile)**

<b>SCHOOL:</b>	<b>COACH:</b>
<b>WORK PHONE:</b>	<b>CELL PHONE:</b>
<b>FAX:</b>	<b>EMAIL:</b>
<b>NO. of ADULTS RUNNING:</b>	<b>NO. of ADULTS WALKING:</b>
<b>FEES: STUDENT Teams</b> <div style="background-color: yellow; padding: 2px;">Team of 5 Runners/Walkers or more in the 5K.....\$15.00 each</div> <div style="background-color: yellow; padding: 2px;">Team of 5 Walkers in 1-Mile Fun Run/Walk..... \$ 8.00 each</div>	<div style="background-color: yellow; padding: 2px;"><b>Individual Students (It's less expensive if YOU create a TEAM!)</b></div> 5K Run/Walk: Students 12 years through 21 years of age..... \$20.00  1 Mile Community Fun Run/Walk: Students 11 years through 21 years of age.....\$10.00

\*T-SHIRT Youth Adult - XS S M L XL XXL XXXL

Walk or Run	Name	Age on Race Day	Gender M/F	Cell Phone	Email	*T-Shirt Size	**Runners Signature – or Parent (Read Waiver Below)

**MAKE CHECKS PAYABLE TO:** McRae-Gaines Learning Center; Mail to: Mrs. Angie McCary, McRae-Gaines Learning Center, PO Drawer 1266, Selma, AL 36702

*Must be postmarked by Tuesday, October 3, 2023 – Otherwise please register on site. Phone 334-872-8078.*

**\*\*WAIVER:** In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the McRae-Gaines Learning Center, the sponsors, and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Alabama. **I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT** to certify that his or her son/daughter/ward has permission to participate in the Event. Parent \_\_\_\_\_ Date \_\_\_\_\_ (Must be turned in by Tuesday, October 15, 2024.)

