

5K Fun Run/Walk

Competition Information

July 10, 2009
6 a.m. Race Start
Hilton Baltimore

AGD Member Team Competition \$250

The AGD Member Team Competition includes four AGD members. Participants will run and be timed with all runners; however, the winner of the competition will be the team with the best average from all four runners. No age restrictions apply.

On-site:

- › T-shirt
- › Post-race food & drink
- › Goodie bags, provided by the AGD Foundation
- › Team listing on AGD Web site, in AGD Impact and in the AGD Foundation Silent Auction Preview

Prizes:

- › 1st - \$500, trophy, and invitation to grand marshal the 2010 AGD Foundation Event in New Orleans
- › 2nd - \$300
- › 3rd - \$200

Individual Runner \$25 Pre-registration/\$30 Race-day

Participants can choose to run as an individual runner. No age restrictions apply.

On-site:

- › T-shirt
- › Post-race food & drink
- › Goodie bags, provided by the AGD Foundation
- › Individual listing at www.agd.org, in AGD Impact and in the AGD Foundation Silent Auction Preview

Empowering

Because of Special Smiles pre-screening and an examination by a dentist, "I have been cancer free... I am now able to show my million-dollar smile every time I have a speech."

Dustin Plunkett,
Special Olympics Global Messenger

Inspiring

Thanks to the generous support of donors, the AGD Foundation helps fund programs that make dental care available to underserved populations, such as individuals with intellectual disabilities. Proceeds from the Fun Run/Walk will benefit Special Olympics Special Smiles® (SOSS).

SOSS is a program in which the AGD Foundation partners with the Special Olympics to identify general dentists who will provide dental care for Special Olympics athletes at events and in-office care for athletes, their families, and care-givers. To continue our mission to empower individuals and help them reach their full potential.

*Thank you for
your support*

5K Fun Run/Walk

Competition Application

July 10, 2009
6 a.m. Race Start
Hilton Baltimore

Questions? Contact Meghan Jorgensen at 312.440.4306 or meghan.jorgensen@agd.org.

Participant Information

AGD Member Team Team Name _____

Individual Runner AGD Member ID# (if applicable) _____

Please print clearly.

Name _____

Email _____ Phone _____

Address _____

City, State, Zip _____

Age on Race Date _____ Date of Birth _____

Gender (circle one): M / F T-shirt Size (circle one): S M L XL XXL

AGD Team Members

Please indicate other runners on your team.

Name _____

AGD ID# _____

Email _____

Phone _____

Name _____

AGD ID# _____

Email _____

Phone _____

Name _____

AGD ID# _____

Email _____

Phone _____

Payment Information

Please select one:

Check enclosed (payable to AGD Foundation)

Credit Card (circle one) VISA MasterCard Discover AMEX

Card # _____ Expiration _____

Name on card _____

Signature _____

Billing Address _____

City, State, Zip _____

AGD Member Team \$250

Individual Runner \$25 Pre-registration/\$30 Race-day

Sponsor Special Olympic Athlete \$15

Return completed applications with payment:

FAX 312.335.3426

MAIL Academy of General Dentistry Foundation
211 E. Chicago Avenue, Suite 900
Chicago, IL 60611-1999

Registration is non-refundable.

The AGD Foundation is a 501(c)(3) charity; gifts to the AGD Foundation are fully deductible for federal income tax purposes, subject to the limitations placed on charitable gifts by the Internal Revenue Service.

Liability Release

In consideration of my entry, I, for myself, my executors, administrators, and assignees do hereby release and discharge the Academy of General Dentistry Foundation, Academy of General Dentistry and Charm City Run, all sponsors, coordinators and all other race organizers and volunteers of all claims of negligence, injuries, damages, demands, and/or actions whatsoever, in any manner, arising from my participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in the event.

Signature (parent or guardian if under 18)

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Participant Sponsor Form

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Have friends and colleagues help support a great cause by sponsoring you in the 5K Fun Run/Walk. Please detach this form from your application, collect names and donation amounts, and submit any time before the event, including on-site in Baltimore. For questions contact foundation@agd.org or 888.243.3369, ext. 4329.

Sponsor Name: _____

Amount Donated: _____

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Amount Donated: _____

Sponsor Name: _____

Amount Donated: _____

Sponsor Name: _____

Amount Donated: _____

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Amount Donated: _____

TOTAL AMOUNT COLLECTED \$ _____

The AGD Foundation is a 501(c) (3) charity; gifts to the AGD Foundation are fully deductible for federal income tax purposes, subject to the limitations placed on charitable gifts by the Internal Revenue Service.

