10th Annual Bleeding Disorder Awareness 5K

 *VIRTUAL*

 Run, Jog or Walk Wherever You Are!

 ***Buy one registration and get one Free\****

 ***\*Sponsored by CASCADE***

This year, join the Southwestern Ohio Hemophilia Foundation virtually! Come be a part of making a difference in the lives of those living with blood disorders like hemophilia and Von Willebrands as we walk, jog or run our way to victory at the BDA 5K Walk/Run!

**Event Information: The Southwestern Ohio Hemophilia Foundation is hosting the 10th Annual Bleeding Disorder Awareness 5K –Virtually. You can complete your 5K (3.1 miles) from any location you choose. You can run, jog or walk on a trail, sidewalk, treadmill at your own pace and time yourself. You can choose your own date and time to have your 5K. Timing can be logged as soon as you register through September 25th. Proceeds from the event will go to the Southwestern Ohio Hemophilia Chapter.**

**Race Fee: *Buy one registration and get one Free!!*  Registration is $20.00 through September 12th (includes t-shirt). Registrations after the 12th will not be guaranteed a t-shirt.**

**Register online** [**https://bleedingdisorderawareness5K.itsyourrace.com**](https://bleedingdisorderawareness5K.itsyourrace.com)

**Or mail in:**

**Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Gender (circle one): Male/Female Age (on race day): \_\_\_\_ Activity (circle one): Run/Walk**

**Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip/Postal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone :(\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Shirt Size (circle one): Adult -S M L XL 2XL Child- S M L**

**Payment: Check made payable to Southwestern Ohio Hemophilia Foundation, mail along with registration form SWOHF**

 **3131 South Dixie Drive, Suite 103**

 **Moraine, OH 45439**

**Event Release: By signing below, I confirm that I am knowingly and freely assuming risks of injury and damage resulting from such participation, including those that result from the negligence of others, that I will assume full responsibility in my participation in the BDA 5K and that Southwestern Ohio Hemophilia Foundation will not be responsible.**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

***Special thanks to our major event sponsor Butler Heating and Air Conditioning***  <https://butlerheating.com/>