

In promoting the healthy development of youth and families the Dudley-Charlton Regional School District is proud to announce the



# “WELLNESS WORKS” SPRING FAMILY FUN FAIR and 5K

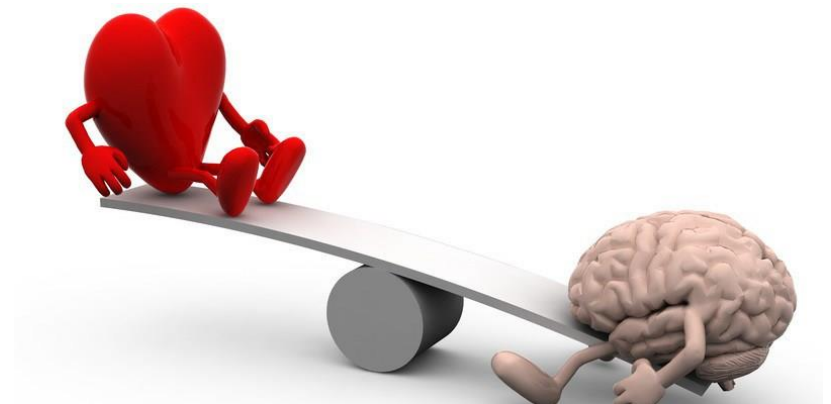
- Promoters of healthy physical & mental living
- Licensed clinicians, social workers & therapists
- Social Service Agencies
- Summer Camps
- FREE Children’s Activities
- Behavioral Health Organizations
- Medical Treatment Facilities
- Youth & Family Recreational Outlets
- FREE Giveaways!

*Saturday; April 28, 2018*

*9:00am-12:00pm*

*Charlton Middle School (Rain or Shine)*

*This is NOT a drop-off event. Parents are expected to stay with their child(ren). Thank you.*



To register you and/or your "team" for the 5K race (\$20/person...includes a T-shirt)

Team Name : \_\_\_\_\_

	Age (as of 4/1/18)	Adult T-Shirt Size					
Participant 1: _____	_____	S	M	L	XL	XXL	XXXL
Participant 2: _____	_____	S	M	L	XL	XXL	XXXL
Participant 3: _____	_____	S	M	L	XL	XXL	XXXL
Participant 4: _____	_____	S	M	L	XL	XXL	XXXL
Participant 5: _____	_____	S	M	L	XL	XXL	XXXL

To register for the kids "Fun Run"

(This is a substantially shorter route than the 5K- FREE! No T-shirts. )

	Age		
Participant 1: _____	(3-4 yrs)	(5-7 yrs)	(8-11 yrs)
Participant 2: _____	(3-4 yrs)	(5-7 yrs)	(8-11 yrs)
Participant 3: _____	(3-4 yrs)	(5-7 yrs)	(8-11 yrs)
Participant 4: _____	(3-4 yrs)	(5-7 yrs)	(8-11 yrs)

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

\_\_\_\_\_

E-mail: \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature (Parent or Guardian if Under age 18): \_\_\_\_\_

I, the undersigned, in consideration of acceptance of the entry and registration as participant in Wellness Works 5K, waive any and all claims which I and my heirs or assigns may now or hereafter have against The Dudley-Charlton Regional School District, its members, the Town of Charlton and Dudley, and all officials, volunteers and sponsors of Wellness Works 5K which may indirectly result from my participation.

I further warrant and represent that I am in proper physical condition to participate in The Wellness Works 5K and am not participating in this event against physician's advice, nor am I taking medications which would impair my health or ability to participate. Further, I grant permission to all the foregoing to use any photographs, motion pictures or any other record of this event for legitimate purposes.

Return form with check Payable to  
DCRSD to:  
Dudley-Charlton Regional School District  
68 Dudley-Oxford Rd.  
Dudley, MA 01571  
Attn: Lorinda Allen "Wellness Works"

**REGISTRATIONS DUE by April 15<sup>th</sup>**

*For more information ,or to register for a booth contact:  
Jennifer McGrail [ljmcgrail@dcrsd.org](mailto:ljmcgrail@dcrsd.org) 508-943-6700  
Heather Brothers [hbrothers@dcrsd.org](mailto:hbrothers@dcrsd.org) 508-248-4884*