



1st Annual *Seize The Moment* Epilepsy Awareness 5K Run/Walk

Saturday November 7, 2009 8:00am
City of Shavano Park City Hall
900 Saddletree Court, Shavano Park, TX 78231

ABOUT THE RACE

The first annual *Seize the Moment* Run/Walk goal is to raise epilepsy awareness. All donations & contributions will continue to fund programs of professional and public education, community service, direct medical assistance, and social services.

REGISTRATION

Registration is available online at www.efcst.org. Forms can also be dropped off at Shavano Park City Hall to Dawn Dirksen. Or, you may drop it off or mail it to Epilepsy Foundation Central & South Texas (10615 Perrin Beitel Suite 602, San Antonio, TX 78217). Packets are available for pickup **Wednesday, November 4, 2009** from **11a-5p** at your *indicated* location.

AWARDS & PRIZES

Trophies will be awarded to the Top 3 Finishers. Prizes will be given to those with the Most Team Members, Most Monies Raised, and Most Team Spirit.

ENTRY FEES

\$25 Registration
\$30 Late Registration (after Nov. 1st)
Race Day Late Registration 7am-7:30am

SPECIAL THANKS TO: City of Shavano Park

ABOUT THE COURSE

Our *Seize the Moment* run takes place on a 3.1 mile tree-lined paved course with gentle rolling hills through the beautiful city of Shavano Park.

ABOUT THE CAUSE

Epilepsy is one of the major health problems of our nation, yet it remains one of our most misunderstood disorders. Epilepsy will strike 1 out of 100 people each & every day! It is the 3rd most common neurological disorder in the United States, after Alzheimer's Disease & stroke. It is equal in prevalence to cerebral palsy, multiple sclerosis, & Parkinson's disease **COMBINED!**

The Epilepsy Foundation of Central & South Texas is the **ONLY** non-profit organization dedicated **SOLELY** to providing epilepsy services to the more than 120,000 people in Central & South Texas who have been diagnosed with epilepsy. EFCST provides various programs and services including, but not limited to, seizure clinics, support groups, information & referral, employment assistance, and public & community education. **Thank you for your support & contribution!**



Join us for our annual Picnic In The Park at Eisenhower Park after the run at 11am. We'd love to see you there!!!

Please make checks payable to Epilepsy Foundation Central & South Texas or EFCST or you may register online at www.efcst.org.

Team Name/Captain: _____

Name: _____ DOB: _____ Age on Race Day: _____ Sex: (circle) M F

Address: _____ T-Shirt Size: (circle) S M L XL

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

I will pick up my Run Packet at: Epilepsy Foundation Central & South Texas Shavano Park City Hall

Enclosed is my entry fee \$ _____ and my additional tax deductible donation of \$ _____ for a total of \$ _____.

*Entry fee is \$25 and \$30 after November 1, 2009.

Release of Liability: In consideration of the acceptance of this registration entry, I assume full and complete responsibility for any injury or accident which may occur during my participation of this race or while on the premises of this event, and I hereby release and hold harmless the sponsors, promoters, and all other persons and entities associated with this event from any and all injury and damage, whether it be caused by negligence of the sponsors or promoters or other persons or entities associated with this event or their agents or employees, or otherwise. I also understand that my entry fee is non-refundable.

Signature: _____ Date: _____

(Guardian Signature if under 18)

SPONSOR LIST: Ask family, friends, neighbors, or coworkers for donations to this worthy cause! Their cancelled check is their receipt. All contributions are tax deductible to the extent of the law. Encourage family and friends to participate. Thank you for supporting Epilepsy Foundation Central & South Texas!

Name of Participant: _____ Name of Team: _____

Sponsor's Name	Street, City, Zip	Donation
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Please make checks payable to Epilepsy Foundation Central & South Texas

Total

Team Name/Captain: _____

Team Member: _____ Sex: (circle) M F T-Shirt Size: (circle) S M L XL

Team Member: _____ Sex: (circle) M F T-Shirt Size: (circle) S M L XL

Team Member: _____ Sex: (circle) M F T-Shirt Size: (circle) S M L XL

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Team Member: _____ Sex: (circle) M F T-Shirt Size: (circle) S M L XL

****Teams can be as big or small as you'd like. The minimum donation per person must meet the individual entry fee of \$25 each.****

Mail forms to: Epilepsy Foundation Central & South Texas, 10615 Perrin Beitel Ste. 602, San Antonio, TX 78217

Questions???: Please call EFCST at (210) 653-5353 or email at staff@efcst.org.