

## MCF Employee Appreciation Committee:

The Miami Correctional Facility's Employee Appreciation Committee is tasked with raising funds and planning events to show appreciation to its staff for their hard work and dedication to their job.

The facility celebrates its staff annually, usually the first week in May and MCF hosts a "Family Fun Day" in the summer for staff and family members.

Each month the committee holds fundraisers selling food to help raise money.

The committee is also tasked with developing events to help keep staff healthy through Indiana's Health & Wellness initiative.

### 2017 Sponsors:



Dutch  
Café

Bob Schwartz Ford-  
Chrysler



Red Dot  
Trophy Shop

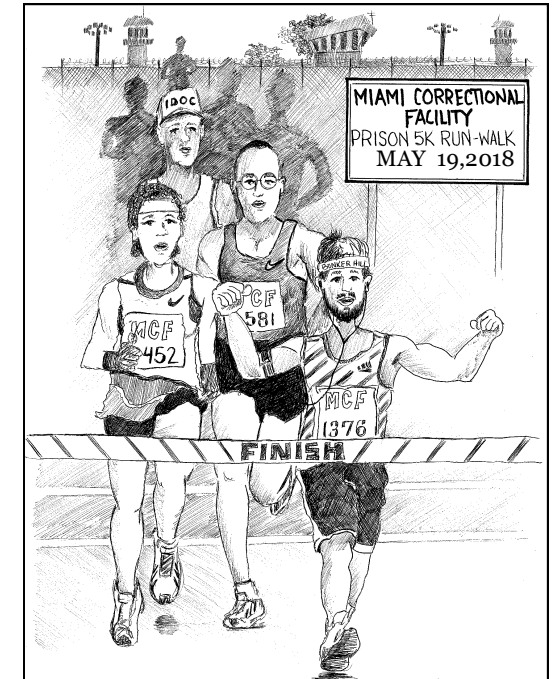


On the Lam Sponsors:  
Gallahan Oil Co., Inc.  
MCF PLUS Unit  
Saine Summers Insurance

## MCF Health & Wellness:

The committee works to create events each month to inform about them on ways to get and stay healthy. This year the committee hosted a "Biggest Loser" Competition and went pink for breast cancer and red for heart disease. This is the fourth year for the Race, which started in May 2011. The goal in the beginning was to develop a race that would be fun and challenging to our correctional staff as well as the community. We also wanted to utilize one of Miami County's best assets—the **Nickel Plate Trail**. About 1 mile of the race will take place on the Trail through Bunker Hill. The committee is committed to providing ways to live a more healthy life.

# MCF Prison 5K Run/Walk



Miami Correctional Facility

3038 W. 850 S.  
Bunker Hill, IN 46914

Phone: 765-689-8920  
Fax: 765-689-7479  
E-mail: [cstover@idoc.in.gov](mailto:cstover@idoc.in.gov)

May 19, 2018

8 a.m.

# Registration:

**Entry Fee:** \$12 MCF staff & family  
 \$15 runners/walkers  
 (\$18 after May 1)

**Awards:** Overall winners to male/female runners/walkers

**Runners:** 1st & second place for: 0-12, 13-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, and 80+ age groups;

**Walkers:** 1st place only for 0-19, 20-30, 31-40, 41-50, 51-60, 60+

Water bottles guaranteed to all pre-registrants

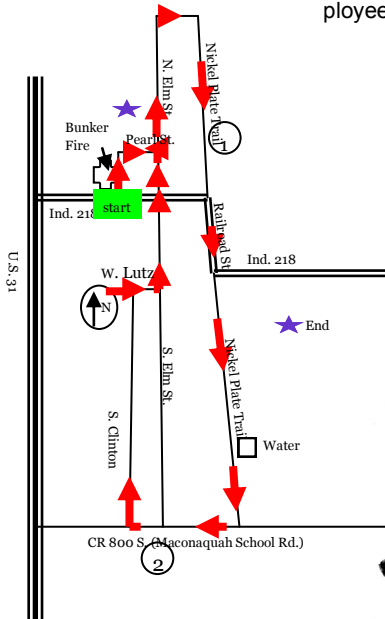
**Race Day Registration is 6:30-7:30 a.m.**

**Race begins at 8 a.m.**

Registration at the **Pipe Creek Fire Dept., 339 Pearl St., Bunker Hill**

**Run Route (3.1 miles)**

All profits go to MCF Employee Appreciation Fund



## Entry Form:

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Gender: M F Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Email: \_\_\_\_\_

T-Shirt size:

**Sm** \_\_\_\_\_ (add \$2 to entry fee)

**Med.** \_\_\_\_\_ **XXL** \_\_\_\_\_

**Lg.** \_\_\_\_\_ **XXXL** \_\_\_\_\_

**XL** \_\_\_\_\_

**Circle Event:** RUN WALK

Make checks payable to:

**Employee Appreciation Committee**

Complete this form in full for each participant and mail check or money order to:

**Miami Correctional Facility  
 c/o Cathy Stover  
 3038 West 850 South  
 Bunker Hill, IN 46914**

(Additional forms are available by emailing

**Cathy Stover: cstover@idoc.in.gov**

## Waiver

**Waiver: Must be signed by participate or by parent/legal guardian if participant is under 18 years old.**

I know that running a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running or walking in this event including, but not limited to: falls, contact with other participants, the effect of the weather including high heat and/or humidity, traffic and conditions of the road or any other running surface: all such risks being known and appreciated by me. For my safety, I understand that bicycles, skateboards, baby joggers, roller skates or inline skates, animals and radio headsets are not allowed in the race and I abide by this guideline. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Miami Correctional Facility/the Indiana Department of Correction, and the State of Indiana, all sponsors, all volunteers, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event though that liability may arise out of negligence or carelessness on the part of the person named in this waiver. I allow my photograph or likeness to be used for any lawful purpose.

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Parent's Signature (if under 18 years of age)

\_\_\_\_\_