

**Saturday,  
November 30, 2024**

**5:00 p.m.  
Sparta, IL**



**Competitive 5K  
Run/Walk  
1.5 Mile Fun  
Run/Walk**

**Benefitting Sparta Police Department's Shop With a Cop program! Holiday attire encouraged!**

**When:** Saturday, November 30, 2024 @ 5:00 p.m. **Race Starts:** Downtown Sparta at the corner of St. Louis St. & Broadway St.

**5K Run/Walk Registration:** \$20.00 by November 15, 2024 guarantees shirt | \$25.00 November 16, 2023 and later does not guarantee shirt

**1.5 Mile Fun Run/Walk Registration:** \$15.00 by November 15, 2024 to ensure shirt | \$20.00 November 16, 2024 and later does not guarantee shirt

**Packet Pick-Up:** Broadway Plaza, Auxiliary Room A, Broadway Plaza, Suite 3, Sparta, IL, 62286

Friday, November 29, 2024 | 8:30 a.m.—11:30 a.m. -or- Saturday, November 30, 2024 | 3:00 p.m.—3:45 p.m.

**Awards:** Presented at Broadway Plaza, Auxiliary Room A, following the race

Top overall male & female. Top three M/F runners in each age group: 13 & under, 14-19, 20-29, 30-39, 40-49, 50-59, 60+

**For questions about registration, please contact Jennifer Barbour at 618-443-1467 | barbour.jennifer@spartahospital.com**

**Please detach portion below and mail with check, payable to Sparta Community Hospital,**

**Mail to: Sparta Community Hospital, Attn: Healthy Holiday Hustle | 818 E. Broadway St., Sparta, IL 62286**



**2024 Healthy Holiday Hustle Participant Registration**

**Name:** \_\_\_\_\_ **Age on Race Day:** \_\_\_\_\_ **Sex:**  M  F

**Street Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Event:**  5K Run/Walk  1.5 Mile Fun Run/Walk

By signing this registration form, I hereby agree that I, on behalf of myself and my heirs, agree to hold harmless Sparta Community Hospital, the City of Sparta and all affiliates for my health, safety, injury, disability, or death arising from or resulting from participating in this event. I give permission for all photos and information to be used for any legitimate purposes.

I understand that no rain dates or refunds will be given in the event of conflict, illness, personal injury, weather, etc. Shirts and awards will not be mailed.

**Preferred T-Shirt Size:**

Youth  S  M  L

Adult  S  M  L  XL  XXL

*GTD if Rec'd by Nov. 15, 2024*

\_\_\_\_\_  
Signature of Participant | Parent/Guardian Consent for participants Under 18

\_\_\_\_\_  
Date

Office Use Only: Date Rec'd \_\_\_\_\_ Cash/Check No \_\_\_\_\_ Amount \_\_\_\_\_ Runner No \_\_\_\_\_