Schedule of Events

When: Saturday, November 5, 2016

Where: Philadelphia Zoo 3400 Girard Aue

Philadelphia, PA

7:00 AM

Check-in and Packet Pickup for Pre-Registered Runners/Walkers Walk up registration closes at 8AM

8:15 AM

5k Start time

8:30 AM

1 Mile walk start (The 'Walk' portion of this event will not be timed)

9:30 AM

Closing Ceremony

Post Race Phamily Phun Enjoy the rest of the day at the zoo!!!

How Can I Help?

- Sponsor us!
- Donate an item or gift certificate to help support the event.
- Volunteer
- Spread the Word!!

Please Contact : Phunrun@phillyphaces.org 267-737-8395

Run Registration

\$40 - runners /walkers includes
 T-shirt and same day zoo admission
 \$30- 1 Mile Walk (11 and under) - includes T-shirt and same day zoo admission
 \$25 Spectator Pass- Zoo Admission Only

Non-registered spectators who would like to attend the event will be required to purchase a zoo admission ticket at a discounted rate of \$25. Spectator pass tickets provide full zoo access before, during, and after the event. If you do not have a ticket, you will not be granted access into the zoo to watch the run/walk.

(Children under 2 are free)

How to Register

- Online: Register by 10/8/2016 to be guranteed a t shirt size. https://philly-phaces.ticketleap.com Search Philly Phaces Phun Run
- By Mail: Complete registration form and return with your payment. All mailed registrations must be postmarked by no later than 10/1/16

Race Day Parking

Zoo parking is available in the Zoo Garage on Girard Avenue for \$16 per vehicle. You can pay in advance on the zoo's website or it can be paid for at the Zoo's Box Office, turnstile kiosks, and upon exiting the parking lot. Zoo members may use their membership cards for parking during events.

Register Online: https://philly-phaces.ticketleap.com Or complete and return this form by mail (postmarked by 10/1/2016)
l'am a: Runner Walker Spectator (circle one)
Name:
AgeSex: M / F
Address:
City:
State:Zip:
Phone #:
Email:
T-shirt Size (circle): Adult SM M LRG XLRG Child SM M LRG
Team Name (optional)
How did you hear about Philly Phun Run?

Waiver & Release (all entrants must sign): In consideration of the acceptance of this entry, hereby for myself, my heirs, my executors and administrators waive, release, and discharge any and all rights and claims for damages I may have against Philly Phaces, their respective representatives and successors, and all sponsors, and will hold them harmless from any injury or illnesses suffered by me while participating in and traveling to and from this event. Also, none of the above are responsible for the loss of personal items nor any other form of aggravation in connection with this event. I have been warned that I must be in good health to participate in this event. Attendance at the event is implied consent to Philly Phaces to take photos of attendees for program purposes such as newsletter publication, website, and social media.

Parent signature required if participant is under 18. All minors must be accompanied by an adult.		
I am unable to participate in	the event but would lik	
to contribute \$	_ to Philly Phaces.	
Make checks payable to	Philly Phaces.	
Please send entry f	orm and	
non- refundable payment to:		
Philly Phace	?S	
PO Box 6318	6	

Philadelphia, PA 19114

Date

Participant's Signature



WE NEED YOUR HELP!!!

By participating in Philly Phun Run you are directly supporting children and families facing facial differences in the Philadelphia region.

A portion of the proceeds will be donated to Children's Hospital of Philadelphia (Division of Plastic Surgery).

Your support will help Philly Phaces:

- Provide our families staying overnight due to surgeries with food vouchers and a refillable mug to use at the Children's Hospital of Philadelphia cafeteria
- Provide peer to peer events throughout the year for families to connect with one another.
- Help us build our Peer Mentorship Program

PHILLY PHACES INC.

is a 501c3 non-profit organization.

"Strengthening and empowering families facing appearance differences in the greater Philadelphia area providing peer support, advocacy and resources."

WHO WE ARE

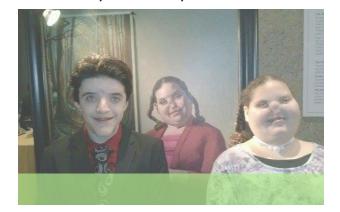
Philly Phaces was established in 2014.

We are volunteers made up of parents, health professionals, and young adults with appearance differences. Whether we are a patient, their parent, or medical provider, we are all intimately impacted by the lifechanging work being done every day by the surgical and mental health professionals in the Philadelphia area. We are passionate about bringing to bear our experiences and resources to help children and their families navigate the medical, social, and psychological issues associated with appearance differences.

WHY IT MATTERS

When a child is first born with a facial abnormality, his or her parents experience a tidal wave of emotions and questions. Will my child be healthy? What social obstacles will he or she face? How do we even begin to educate ourselves on which surgeries, doctors, and therapies will be required?

No one knows the answers to these questions better than the parents and patients who have been through the process. We are those parents and patients.



Philly Phaces Inc.

