



FRIDAY, JULY 4TH 7 AM

Epilepsy Foundation of Hawaii 5K | 10K | 1-Mile

REGISTRATION

- ✓ Create your team or register as an individual at [www.epilepsyhawaii.org](http://www.epilepsyhawaii.org/runsignup) (runsignup)
- ✓ Mail-in registrations must be received by Friday, June 27, 2025. You may call 808-528-3058 for questions. Race day registration accepted until 6:30 am

PACKET PICK-UP

- ✓ TBD or race day starting at 5:30 AM

TIMING

- ✓ Chip timing. Pick up on race day
5K & 10k professionally timed by Timeline Hawaii

PETS

- ✓ 🐾 Pets check in off-campus (no animals allowed on school grounds)

LOCATION

- ✓ Kailua High School 451 Ulumanu Drive, Kailua 96734

AWARDS & PRIZES

- Prizes for 1st place male and female overall 5K & 10K winners
- Medals for 1st, 2nd & 3rd place male/female finishers in all categories.
- Prizes: Top individual fundraiser, top team fundraiser, largest team, most purple, most creatively dressed pet.

QUESTIONS EMAIL FREEDOM@EPILEPSYHAWAII.ORG

Full name	<input type="text"/>		
Address	<input type="text"/>	Mobile Phone	<input type="text"/>
Zip Code	<input type="text"/>	Email	<input type="text"/>

EVENT

☐ 5K = \$50

Official timing by Timeline Hawaii and race t-shirt included
T-SHIRT SIZE (S-3XL) _____ AGE (as of July 4, 2025) _____

☐ 10K = \$50

Official timing by Timeline Hawaii and race t-shirt included
T-SHIRT SIZE (S-3XL) _____ AGE (as of July 4, 2025) _____

☐ 1-Mile = Free

Incentives for race shirts & prizes available.
BUILD YOUR TEAM AND WEAR PURPLE!!!

RECEIVED BY EFH

☐ ☐ / ☐ ☐ / ☐ ☐

Subtotal: _____

Add. Donation: _____

Enclosed \$: _____

Checks can be made out and mailed to:
Epilepsy Foundation of Hawaii
200 N. Vineyard Blvd., B-259
Honolulu, HI 96817

Freedom Run Waiver and Release of Liability

I understand that participating in the Freedom Run is a potentially hazardous activity. By signing below, I confirm that I am medically able, properly trained, and voluntarily assume all risks associated with this event. These risks include, but are not limited to, falls, collisions, traffic hazards, weather conditions, and road conditions. In consideration of my participation, I hereby waive, release, and discharge the Epilepsy Foundation of Hawaii, Kailua High School, the Department of Education, State of Hawaii, City and County of Honolulu, event officers, directors, volunteers, and all others associated with this event, from any and all claims of liability for death, injury, or property damage arising from my participation. I also grant permission to use my image and quotes in event-related materials and promotions. By participating, I acknowledge that I have read and agree to this waiver.

Signature: _____

Date: _____