



2010
Arthritis Awareness Health Fair
featuring
The “Chilly Bones” 5K Classic

Welcome to OOCF Foundation’s **Arthritis Awareness Health Fair & “Chilly Bones” 5K Classic**. The Health Fair will include arthritis management, osteoporosis, common orthopedic conditions and treatments, along with safety, bracing and medical supplies. The 5K run will take runners/walkers through portions of beautiful Upper Arlington and include a fun filled morning with food, music & awards. These events are in an effort to raise awareness on the subject of musculoskeletal conditions including arthritis, osteoporosis, and advancements in treatment & management. Proceeds will benefit OOCF Foundation to help continue to improve the quality of patient care and medical services through a commitment to research, education, outreach, and prevention of orthopedic and neurologic disorders.

Where

- Ohio Orthopedic Center of Excellence
4605 Sawmill Road
Upper Arlington, OH 43220

When

- Saturday, November 6, 2010
- Arthritis Awareness Health Fair 8:30 a.m. – noon
- *Chilly Bones* 5K Classic Registration 8:30 a.m. – 9:30 a.m.
- *Chilly Bones* 5K Classic Race begins 10:00 a.m.

Who

- Health Fair – open to public (free)
- *Chilly Bones* 5K Classic – fee to participate (see registration form)

More Information

- Visit www.ohio-ortho.com
- Become a Fan of OOCF by joining our Facebook Fan Page
- Visit www.premierraces.com
- Contact Denise Berry @ 614.827.1040 or dberry@ohio-ortho.com



facebook

Arthritis Awareness Health Fair & "Chilly Bones" 5K Classic

Sponsorship Opportunities

Presenting Sponsor (only 1 available) **\$5,000**

- Two corporate display tables in premium atrium location
- Company name/logo on signage at race start & finish line
- Company name/logo on race t-shirts
- Company name/logo on all advertising/media material
- Company name/logo on OOCE Foundation website
- Full page ad in OOCE Foundation's *Centerpoint* Magazine
- Twenty exclusive corporate team race t-shirts
- Twenty race registrations and race bags
- Opportunity to provide give a ways, brochure, or flyers in race bags

Gold Sponsor (only 4 available) **\$2,500**

- Two corporate display tables in premium atrium location
- Company name/logo on signage at race start & finish line
- Company name/logo on race t-shirts
- Company name/logo on all advertising/media material
- Company name/logo listed in OOCE Foundation's *Centerpoint* Magazine
- Ten race registrations, t-shirts, and race bags
- Opportunity to provide give a ways, brochure, or flyers in race bags



Premium Sponsor (only 6 available) **\$1,500**

- Corporate display table
- Company name/logo on all advertising/media material
- Company name/logo listed in OOCE Foundation's *Centerpoint* Magazine
- Company name/logo on race t-shirts
- Five race registrations, t-shirts, and race bags
- Opportunity to provide give a ways, brochure, or flyers in race bags

Corporate Table Sponsor **\$500**

- Corporate display table
- Opportunity to provide give a ways, brochure, or flyers in race bags

Food & Beverage Sponsor (only 3 available) **\$500**

- Company name/logo on signage at food site
- Opportunity to provide give a ways, brochure, or flyers in race bags

Chilly Bones 5K Classic Race Route Sponsor **\$100**

- Company name/logo on signage on the race route
- Opportunity to provide give a ways, brochure, or flyers in race bags

Arthritis Awareness Health Fair & "Chilly Bones" 5K Classic Event Acknowledgement_____

Please check the appropriate level of participation below and return to:
OOCE Foundation, Attn: Denise Berry, 4605 Sawmill Road, Upper Arlington,
OH 43220 or fax/614.827.8671 or email/dberry@ohio-ortho.com

Level of Sponsorship

- | | |
|--|---------|
| <input type="checkbox"/> Presenting Sponsor | \$5,000 |
| <input type="checkbox"/> Gold Sponsor | \$2,500 |
| <input type="checkbox"/> Premium Sponsor | \$1,500 |
| <input type="checkbox"/> Corporate Table Sponsor | \$500 |
| <input type="checkbox"/> Food & Beverage Sponsor | \$500 |
| <input type="checkbox"/> <i>Chilly Bones</i> 5K Classic Race Route Sponsor | \$100 |

Credit Card # _____

Credit Card Type (check one): Visa MasterCard Discover Am Express

Exp. Date: _____ Authorized Signature: _____

- Check Enclosed (made payable to OOCE Foundation)
 Please invoice me
 Sorry, we're unable to participate, but enclosed is a donation of \$_____

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____

Business Email: _____

For more information, please call Denise Berry at 614.827.1040





Chilly Bones 5K Classic

Ohio Orthopedic Center of Excellence Foundation

Saturday, November 6th @ 10:00 a.m.

Registration 8:30 – 9:30 a.m.

Location: OOCE, 4605 Sawmill Road, Upper Arlington, OH 43220

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Shirt Size (check one): Small Medium Large XLarge XXLarge

Age: _____ (day of race) Male Female

Registration Fees _____

\$25.00 - on or before 10/16/10

\$30.00 - after 10/16/10

Method of Payment _____

- Cash
- Check Enclosed (made payable to OOCE Foundation)
- Credit Card # _____

Credit Card Type (check one): Visa MasterCard Discover American Express

Exp. Date: _____ Authorized Signature: _____

You may register _____

- By phone @ 614.827.1040 with credit card
- Email registration form & credit card info to dberry@ohio-ortho.com
- Fax registration form & credit card info to 614.827.8671
- Online @ www.premierraces.com
- Mail registration form and payment to: OOCE Foundation
Attn: Denise Berry, 4605 Sawmill Road, Upper Arlington, OH 43220
- Day of race: Registration @ OOCE between 8:30 – 9:30 a.m.

Emergency Contact Name & Phone # (required) _____

Waiver and Release:

I agree that if I participate in this physical activity, program or event (the "Event") or use any Event facility or Event premises, I do so at my own risk. I agree that I am voluntarily participating in the Event and using Event facilities or premises and assume all risk of injury, illness, damage or loss to me or my property that might result, including without limitation, any loss or theft of personal property. I hereby consent to medical treatment in the event of injury, accident and/or illness during the Event. I agree on behalf of myself (and my personal representatives, heirs, executors, administrators, agents, and assigns) to release and discharge Ohio Orthopedic Center of Excellence, Ohio Orthopedic Center of Excellence Foundation, City of Upper Arlington, City of Columbus, Perry Township and all Event sponsors & volunteers from any and all claims or causes of action (known or unknown) arising out of their negligence. I understand that I may be photographed and agree to allow my photo, video or film likeness to be used for any legitimate purpose by the aforementioned parties. The entry fee is non-refundable. I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a release of liability. By my signature below, I am waiving any right that I may have to bring legal action to assert a claim against Ohio Orthopedic Center of Excellence, Ohio Orthopedic Center of Excellence Foundation, City of Upper Arlington, City of Columbus, Perry Township, and all Event sponsors & volunteers for their negligence.

Signature of Participant (or parent/guardian if under 18 years of age)

Date

Contact Person: Denise Berry @ 614.827.1040 or dberry@ohio-ortho.com

Chilly Bones 5K Classic

Ohio Orthopedic Center of Excellence Foundation

Saturday, November 6th @ 10:00 a.m.

Registration 8:30 – 9:30 a.m.

Location: 4605 Sawmill Road, Upper Arlington, OH 43220

Race Route: TBD

Age Groups/Prizes:

*Top 3 Overall Females

*Top 3 Overall Males

*Top 3 Females in each age category

19 & Under

20-29

30-39

40-49

50-59

60 & over

*Top 3 Males in each age category

19 & Under

20-29

30-39

40-49

50-59

60 & over



Contact Person: Denise Berry @ 614.827.1040 or dberry@ohio-ortho.com