Color Me Pink

Run/Walk

Chan Soon-Shiong Medical Center at Windber

Joyce Murtha Breast Care Center

Raising funds to advance patient care and breast cancer research at the Joyce Murtha Breast Care Center.

Saturday, October 18, 2025

5K Run/1.5 Mile Walk:

Enjoy a scenic course, starting and finishing at the Joyce Murtha Breast Care Center (JMBCC). Participants will go through pink color stations throughout the course; please consider wearing a white shirt or your favorite costume! Water will be offered on the course, and a police escort and ambulance protection will be available.

Awards:

For the 5K Run only, awards will be given to the top male and female finisher, as well as the top male and female in each age group listed below.

Run Age Groups:

10-14	40-49
15-19	50-59
20-29	60+
30-39	

5K Run Details

Registration 8:00 a.m.
Start Time: 9:00 a.m.

Location: JMBCC

Entry Fee:
Before October 4 - $25
Youth 17 and under - $15

After October 4 - $30

1.5 Mile Walk Details

Registration 8:00 a.m.
Start time 9:05 a.m.

Location: JMBCC

Entry Fee:
Before October 4 - $25
Youth 17 and under - $15

After October 4.....$30

You can also register online at

https://www.raceentry.com/races/color-me-pink-runwalk/2025/register

---

Color Me Pink Run/Walk Entry Form

Check one: **O 5K Run**
O 1.5 Mile Walk
O Donation Only

Check one: **O Male** **O Female**

Birthdate: _____

T-shirts for paid entries (Circle size)
Youth: YS YM YL
Adult: S M L XL 2X 3X

No Shirt

Amount enclosed: _____

Please make checks payable to:
Windber Health Care Foundation

Return completed form to:
Windber Health Care Foundation
600 Somerset Avenue
Windber, PA 15963

_____
Name

_____
Address

_____
City **State** **Zip**

_____
Phone

_____
Email

_____
Emergency Contact Name

_____
Emergency Contact Phone Number

Waiver: In consideration of your accepting my entry, for myself, my heirs, and my assign, I waive and release Chan Soon-Shiong Medical Center at Windber (CSSMCW), any sponsors, and any volunteers associated with the event, from any and all claims, now and in the future for any and all injuries, illnesses, losses, damages, or death in any way connected with my participation in the Color Me Pink Run/Walk on October 18, 2025. I assume all risks associated with participation, including, but not limited to falls, contact with other participants or vehicles, effects of the weather, and course hazards. I am aware participation is strenuous and may be hazardous. I verify that I am physically fit and sufficiently trained to compete in this event. This waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

_____
Signature

_____
Guardian signature if under 18