

Mid-Ohio Psychological Services, Inc was established in 1992 to provide quality mental health services to Fairfield County.

OUR MISSION

The Mission of Mid-Ohio Psychological Services, Inc. is to provide a full continuum of quality, cost effective mental health and substance abuse services to the residents of Central and Southern Ohio in a client centered, hospitable fashion, meeting both the clients' and the community systems' needs.

OUR VISION

Mid-Ohio Psychological Services, Inc. is a culturally and socially responsive agency striving to develop a comprehensive program based on the needs of the community where all persons experiencing substance abuse and mental health issues may achieve their full potential.

Selected programs at the agency have been CARF accredited



www.carf.org

Mid-Ohio Psychological Services Inc. is an Independent Contract Agency of the Fairfield County ADAMH Board

SPONSORS

FAIRFIELD COUNTY ADAMH BOARD

KOHL'S DEPARTMENT STORE

SAM'S CLUB

STIFEL NICOLAUS & COMPANY, INC

ADAM CUSTER OF EDWARD JONES

CLARK BEHRENS INSURANCE

SOYJOY NUTRITION BARS

THE FIRST 200 INDIVIDUALS TO REGISTER WILL RECEIVE A GIFT CERTIFICATE TO CHIPOTLE GOOD FOR ANY ONE MENU ITEM.



STRIDES FOR MENTAL HEALTH 5K Walk/Run April 26, 2008



624 and 630 East Main Street
Lancaster, OH 43130
(740) 687-0042

www.mopsohio.com



108 West Main Street
Lancaster, OH 43130
(740) 654-0829

www.fair-mh.org

WHEN: Saturday, April 26, 2008 at 8 a.m.

WHERE: Start and Finish– Downtown on the corner of Broad and Main Streets in Lancaster, Ohio.

COURSE DESCRIPTION: The course will travel south on Broad Street through Cenci Lake Park and back to the starting location. There will be one water station located at Cenci Lake Park.

PACKET PICK UP: Every day beginning April 21, 2008 at Mid-Ohio Psychological Services, Inc. 624 E. Main Street Lancaster, OH 43130
Monday – Thursday: 8 a.m. – 7 p.m.
Friday : 8 a.m. – 5 p.m.

RACE DAY REGISTRATION AND PACKET PICK UP: 7:00 a.m.-7:45 a.m. at the corner of Main and Broad Streets.

AWARDS AND GIFT DRAWING:
Awards for the first three male and female finishers in the following age groups: 14 and under, 15-19, 20-29, 30-39, 40-49, 50-59, 60+. All runners and walkers will be entered into the drawing to win various gift certificates from local businesses and restaurants.

AWARDS CEREMONY AND GIFT DRAWING: 10:00 a.m.

HOW TO REGISTER:

1. Mail this registration form to Mid-Ohio Psychological Services, Attention Shawna Watts 624 E. Main Street Lancaster, OH 43130
2. You can download other registration forms at our website: www.mopsohio.com OR at www.ohiorunner.com.
3. If you have any questions, please contact Shawna Watts at (740) 687-0042 or email us at run@mopsohio.com.

DIRECTIONS TO THE EVENT:

Lancaster is southeast of Columbus.

From Columbus: Take 33 South (can be accessed from 70 or 270). Take the Lancaster Business Route, also known as Memorial Drive. Make a left on to Main Street, heading east. The event will be on the corner of Main and Broad Streets in Lancaster, Ohio. There is street parking available.

If you wish to obtain driving directions to this event, the following address of the Fairfield County ADAMH Board can be used. The ADAMH Board is located near the corner of Broad and Main Streets:

108 W. Main St. Lancaster, OH 43130

REGISTRATION FORM (one per participant)

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Birth Date: _____

T-Shirt Size: Adult - S M L XL XXL
Child – M

(T-shirts guaranteed for the first 200 participants)

Circle one: Male Female

Entry Fee: \$10, race day is \$15

TOTAL Enclosed

Send check and registration form to:
Mid-Ohio Psychological Services, Inc
Attention: Shawna Watts
624 E Main Street
Lancaster, OH 43130

By my signature, I attest that I am physically fit and sufficiently trained to participate in this event. I have full knowledge of the risks involved. Therefore, in consideration of the acceptance of my entry to Mid-Ohio Psychological Services, Inc 5k, I for myself, heirs, my executors, and administrators waive any and all rights and claims for injuries, damages, or death I may have against Mid-Ohio Psychological Services, Inc., all sponsors associated with this event, and any individuals associated with this event and will hold them harmless for any and all injuries or damages I may suffer in conjunction with this event, including death.

I, _____ give my permission for the person listed on this registration form to participate in the 5K walk/run.

Signature: _____

Print Name: _____