

sharon's run walk for epilepsy, 2026

Join the Epilepsy Foundation of Greater Southern Illinois for Sharon's Run Walk, 2026, a movement that brings our community together to educate, spread awareness, and make a difference for the people we love who live with epilepsy.

Sharon's Run Walk, 2026 is a 5K Run and a 1 mile Walk, but it's more than that.

IT MATTERS BECAUSE...

- 1 in 10 will have a **SEIZURE** in their lifetime
- 1 in 26 will be **DIAGNOSED** with **EPILEPSY**
- Over 43,000 **SOUTHERN ILLINOISANS LIVE** with **EPILEPSY**
- 3.4 **MIL** individuals nationwide are **AFFECTED** by **EPILEPSY**

WHY RUN?

Run for the Southern Illinois community living with uncontrolled seizures, proving that no one fights alone.

WHY WALK?

Every step you take helps newly diagnosed individuals in Southern Illinois find their footing. Support us in offering the direct support, expert information, and referrals that change lives each year.



Activities Include

Refreshments
Face Painting
Balloon Art
Music
And a
50/50 Raffle

DETAILS

Date: October 3, 2026
(Rain or Shine)
Location: Moody Park
525 South Moody Lane
Pavilion #5
Fairview Heights, IL 62208

TIME SCHEDULE

9:00 am Registration
9:30 am 5K Run
10:00 am 1 Mile Walk

SPONSORED BY



Every dollar raised at Sharon's Run Walk, 2026 stays right here in Southern Illinois to support over 43,000 Southern Illinoisans living with epilepsy.



GREATER SOUTHERN
ILLINOIS



GREATER SOUTHERN
ILLINOIS

Sharon's Run Walk, 2026 Registration Form

Or register online at www.efgreateril.org

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____

Email _____

Entry Fees:

- Individual – 13 years and older, \$25 each
- Children (12 or Under, Seniors (62 or over) or adults with disabilities, \$15 each

List all Participants and t-shirt size (YS, YM, YL, AS, AM, AL, AXL, A2X, A3X):

Name _____ T-Shirt Size _____

Name _____ T-Shirt Size _____

Name _____ T-Shirt Size _____

Name _____ T-Shirt Size _____

Name _____ T-Shirt Size _____

I am not able to participate in Sharon's Run Walk, 2026 but would like to make a donation. Enclosed is my check for:

_____ \$500 _____ \$250 _____ \$100 _____ \$50 Other Amount \$ _____

Complete this form and mail it along with your check payable to:

Epilepsy Foundation of Greater Southern Illinois
3515 North Belt West
Belleville, IL 62226

WAIVER: I hereby waive all claims against the Epilepsy Foundation of Greater Southern Illinois, sponsors, organizers, or any individual employed by or acting on behalf of the foregoing, as well as any organization or other entities that permit access to their premises, for any injury I might suffer in this event. I attest that I am physically fit and prepared for this event. I grant full permission for organizers to use photographs and video footage of me and quotations from me in legitimate accounts and promotions of this event. Entries from minors will only be accepted with a parent or legal guardian's signature.

Signature _____

(Parent or guardian's signature, if less than 18 years of age)