

Rallie for Allie

My name is Allie Armstrong, wife to Adam and mother to Paige (8), Hayleigh (5) and Mollie (3). Just over a year ago we began our journey with leukemia. This disease is an instant life changer on many levels. Not only did our lives change physically but mentally also. I was in the hospital being loaded up with chemo while my family continued to pull together to keep life at home as normal as possible. We have walked this road with many unexpected turns and changes yet amidst this challenging journey we have found deeper faith and a greater understanding of God's mercy and grace through so many. From the beginning we asked The Lord to give me purpose in this journey. Beyond fighting this disease and caring for our family we have found great purpose in allowing our story to reach others in their place in life.

I was diagnosed with AML in March of 2012 and by God's grace went into remission after induction chemo. After much prayer and seeking we decided to transplant as God provided a perfect match in my brother Jonathan. On July 3, we transplanted and things went smoothly. I began to recover and resume some normal life; I even had hair that almost could be styled. In late November, I began to notice that my joints ached as if I were 50 instead of my spry age of 32. I mentioned this thinking nothing of it. This alerted my Doctor and we decided to check labs in a week. My counts had dropped which sent us to an immediate biopsy. On December 14, we learned I had relapsed. Since then I have been trying to get the disease in remission to move forward with another transplant. We are currently on an investigational drug at MD Anderson in Houston, Texas. We travel back and forth at this time. Again God's love has been shown through His provisions for a place to stay close enough to walk to the hospital, a car to drive and many free flights. He journeys with us. Until I am in remission we cannot transplant. This disease is not one I can live with or keep controlled, it needs to be annihilated.

As you consider running/walking today for our family know that your support and care for us is appreciated. Hope it's a fun day for all.

When: July 6, 2013, Start time 9:00 am

Where: Keyser Park

Registration: Please make checks payable to:

Adam Armstrong

Mail to:

Vicki Lojek-Goldman

3464 Symphony St.,

Cuyahoga Falls, OH. 44223

through June 22

By participating in this run/walk you are helping the Armstrong family get through this hard time. You can read more about Allie's story at www.livestrongarmstrong.com



Rallie for Allie 5K Run/Walk Registration Form
Return forms and payment to address above

Name: _____ Age ____ Gender: F ____ M ____

Address: _____

Email: _____ Phone: _____

_____ 5K Run (\$25.00) _____ Walk Adult (\$25.00) _____ Walk Child (\$15.00)

T-Shirt size (please Circle) S M L XL XXL

I would like to pay by (please circle): Cash Check

Please make checks payable to: Adam Armstrong

Liability Waiver must be signed to participate in the Rallie for Allie 5K Run/Walk I recognize that running a road race is a potentially hazardous activity. I have read the race flyer and am familiar with the course, procedures, and rules. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including cold, snow, and/or ice, high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the organizers of the Rallie for Allie 5K Run/Walk, its directors, officers, staff, and volunteers, the city of Cuyahoga Falls, OH, its employees, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature of Participant (Parent or Guardian if under 18): _____ DATE: _____