

Thank you for your interest in the Mary Byrd-Davis Scholarship 5k walk/run to be held on November 11, 2017.

REGISTRATION FORM

Please PRINT NEATLY and fill out completely. (Entries without age and gender will not be eligible)

Waiver Must Be Read And Signed Before Mailing Or Turning In

In consideration of this entry being accepted, I hereby for myself, heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against the St. James Baptist Church, race officials, and all sponsors, of all claims or liabilities of any kind arising out of my participation in this event. I allow any photographs or materials from this event to be used to publicize this or future walk/runs.

Applications are now being accepted for the Mary Byrd-Davis Scholarship Fund 5K Run/Walk. The annual fundraiser in honor of the late Mary Byrd-Davis is scheduled for an 8:30 a.m. start from the St. James Baptist Church at 144 MLK Dr. in Baconton, GA.

The day of the event, registration begins at 7:15 a.m.; however early registration is encouraged by printing out and mailing this downloadable Mary Byrd-Davis 5K PDF registration form to: 144 MLK Drive, P.O. Box 322 Baconton, GA 31716.

Please complete the entry form. Call (229) 787-5334 or (229) 881-1163 or email to info@stjamesbc.com for more info. Attach payment Payable to Mary Byrd-Davis Scholarship Fund or mail to P.O. Box 322 Baconton, GA 31716.

All proceeds benefit the Mary Byrd-Davis Scholarship Fund for youth scholarships.

Those interested in supporting the Mary Byrd-Davis Scholarship Fund, but not participating in the run/walk, may send tax-deductible checks, payable to the "Mary Byrd-Davis Scholarship Fund," to P.O. Box 322, Baconton, GA. 31716. Donations from non-run/walk participants can also be made on-line by clicking on the "Donate Now" link at the Community link on the website www.stjamesbc.com. Type "Mary Byrd-Davis 5K" in the space provided to support a specific Community Foundation fund.

T-Shirts will be given to all participants of this event.

Name (First) _____
(M) _____ (Last) _____

Address: _____

City: _____ Zip Code: _____

State: _____

Daytime Phone: (____) _____ - _____
Email: _____

Gender: M _____ F _____
Age on race date _____ D.O.B. _____

Is this your first walk/run? _____
How many runs have you participated in? _____

How did you hear about this event? _____

5K Walk/Run Registration: \$20.00

T-Shirt Size (Check one):

Women's: S. _____ M _____ L _____ XL _____ 2X _____
3X _____ 4X _____ 5X _____ 6X _____ 7X _____

Mens: S _____ M _____ L _____ XL _____ 2X _____ 3X _____
4X _____ 5X _____ 6X _____

Kids: S _____ M _____ L _____ XL _____

Signature Requested _____

Date _____

Parent's Signature (if under 18) _____
