

Presented by:



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November 18, 2017 @ 8:00 am • Downtown Warner Robins

Registration Fees:

Pre-Registration	\$20
*Postmarked by 11/04/2017 (guarantees a T-shirt)	
Race Day Registration	\$25

Race Day Schedule:

Check-in/Registration	6:30-7:45 am
5K Start Time	8:00 am
Awards Ceremony	9:15 am

Directions:

I-75 to Exit 146. Travel East towards Robins AFB. Turn left on Davis Drive. First United Methodist Church will be on the left. Check in will be in back parking lot of church.

Alternate route: Hwy. 247, turn onto Watson Blvd. Turn right on Davis Drive, church is on the left.

Awards:

- Awards will be given to the first overall male and female
- Awards to 3 male and female finishers in each of the following age groups:
under 10, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, and 75 & over

Make checks payable to First United Methodist Church (FUMC). Mail form and check to: First United Methodist Church, 205 N. Davis Dr., Warner Robins, GA 31093. Memo the check: "5K" Please do not send cash through the mail. Checks or money orders only. For more information or race questions, please contact Ben Lee at (478)923-3737, ext. 111 or email at blee@fumcwrge.org. All proceeds benefitting the Student Ministries of FUMC.

FULL NAME: _____ PHONE NO: _____

ADDRESS: _____ CITY/STATE/ZIP _____

PHONE NO: _____ EMAIL: _____

AGE: (day of race) _____ GENDER: _____ male _____ female

CIRCLE T-SHIRT SIZE: Youth M Youth L S M L XL XXL

WAIVER AND RELEASE: I, individually, (and/or as a parent, and/or guardian of the named minor) for and in consideration of acceptance of this entry in the aforementioned event, do hereby release, remise, waive, and forever discharge First United Methodist Church and any and all other supporting groups of this said racing event, together with all their officers, agents, officials, and employees, from any and all liability, claims, demands, actions, or causes damage, including death, relating to any injury, illness, loss, and further state I am in proper physical condition to participate in this event. In addition, I agree that my participation in this event requires that I will not participate with roller blades, skateboards, animals, or anything which the race director deems dangerous to myself or other participants and that the race director may remove me from this event for a violation of said policy. I further grant permission to this race and the organization conducting the race and/or agents authorized by them to use any photographs, videotapes, motion picture, recordings and any other record of this event for any purpose. I also agree that if the event is cancelled for any reason that all entry fees are non-refundable.

Signature: _____

Date: _____

(Must be signed by a parent, if under the age of 18)