



**Outpace Parkinson's 5K
In-Person and Virtual
Saturday, April 5, 2025
Sandy Creek Park
400 Bob Holman Road, Athens, GA**

Make the most of your miles in the race to cure Parkinson's by becoming a Team Fox Athlete! Come run with us and make your miles count towards a cure for Parkinson's!

***Race Day Registration begins at 8:00am
5K @ 9:00am ~ 1-Mile Walk @ 9:15am***
All times are Eastern Daylight Time

Registration: Complete the registration form, one form per person.

Fee: \$25 per person, received by March 21st.

Late registration / race day fee is \$30. Late registration begins March 22nd and continues through race day.

Payment accepted by check made out to *Outpace Parkinson's* or Venmo: @Outpace

Online registration available at <https://runsignup.com/outpaceparkinsons>. Online registration closes at Midnight April 2nd.



Run
Signup

T-shirts: Available for runners registered by midnight March 21st.

T-shirts are not guaranteed after March 21st.

Parking: Plenty of parking spaces are available at SCP.

5K Awards: Awards will be presented to Overall Male/Female, Masters Male/Female, Grandmasters Male/Female and first, second and third place in 10-year age groups beginning with 10 and under and going through 80 and over.

Virtual: Run your 3.1 miles anywhere. Virtual runners are not eligible for race day awards. T-shirts may be picked up from the home of Jack Armistead on Sunday, April 6th. T-shirts will not be mailed. More information will be emailed to virtual runners. Submit finish time by 12 Noon EDT on April 5th to <https://runsignup.com/outpaceparkinsons/results>.

For more information visit the local website: pdathens.com

Local e-mail: Jack Armistead, jackprof@icloud.com or Carole Black, classicraceservices@gmail.com





Paper registration form for Outpace Parkinson's
Please complete one form per person

Make checks payable to Outpace Parkinson's, mail entry to:

Outpace Parkinson's 5K Run/Walk
C/o Classic Race Services
1860 Barnett Shoals Road, Suite 103-498
Athens, GA 30605

Registration type selection box with options: In Person, Virtual

LAST NAME: _____ FIRST NAME _____

BIRTHDATE ___/___/___ Male ___ Female ___

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS: _____

SHIRT SIZE: (circle one) S M L XL XXL NO shirt ___ 5K ___ 1-Mile Walk
Registration form must be received by March 21, 2025 to be guaranteed a t-shirt.

I cannot run / attend, but would like to make the following contribution:
(t-shirt not included)

PAYMENT AMOUNT: _____ Check _____ Venmo @Outpace

WAIVER: In consideration of acceptance of this entry, I waive all claims for myself and my heirs against the officials and sponsors and benefiting parties of the Outpace Parkinson's 5K Run/Walk, for injury or illness which may result directly or indirectly from my participation. I further state that I am in proper condition to participate in this event.

Signature of Participant or Parent's signature if Participant is under 18 DATE

