

7th Annual Run for Veterans

5K Road Race



Saturday, November 4, 2017

Benefiting: Dwight D. Eisenhower Army Medical Center Fisher House

WHEN: Registration and packet pickup will begin at **7:00AM** at Veterans High School. The 5K Race will begin at **8:00AM**. Awards presentations will begin at **9:30AM**. Long sleeved running shirts will be guaranteed to all pre-registered runners and as supply lasts for race day entries.

WHERE: Veterans High School located at 340 Piney Grove Road, Kathleen, Georgia 31047.

AGE GROUPS: 10 and under, 11-14, 15-19, 20-24, 25-29, 30-34, 35- 39, 40-44, 45-49, 50-54, 55-59, 60-69, and over 70 for both men and women

AWARDS:

1. The top 3 male and female finishers in the age groups above
2. Top three overall Men and Women and the top masters' Male and Female runner

ENTRY FEE: (Make checks payable to VHS AFJROTC).

1. **\$20.00** Includes a race shirt (Must register before the 20th of October)
2. **\$15.00** No Shirt Option (Available to runners who register before the 20th of October)
3. **\$15.00** All runners who register after the 20th of October (No race shirt)

INFORMATION: For additional information, contact Lt Col Atkins at steven.atkins@hcbe.net or (478)218-7567
Please make checks payable to and mail your registration form to: **Veterans High School AFJROTC, 340 Piney Grove Road, Kathleen, GA 31047**

ENTRY FORM - ONE RUNNER PER FORM

NAME: _____ **D.O.B.:** _____ **M** ___ **F** ___

ADDRESS: _____ **CITY:** _____ **ST:** _____ **ZIP:** _____

PHONE NUMBER: _____

SHIRT SIZE: S M L XL XXL

EXTRA DONATION: I would like to donate: \$ _____

WAIVER: In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against officials, sponsors, hosts, or any other person or persons in conjunction with the Annual 5K Run for Veterans. I understand that running a race can be hazardous. I am in proper physical condition to participate in this event. I also give my permission for use of my name and picture in any media or other account of this event.

Signature _____ Date _____
(if under 18, parent's signature)