

Proudly Presents the
Kings Bay 5K
5k Run & 1 Mile Walk

To Benefit Eckerd Youth Alternatives, Inc.
Early Intervention and Prevention Services, Hi-Five Citrus Program

Saturday, November 6, 2010

6:30 am Registration & Packet Pick-up
7:30 am 5k Race
7:45 am 1 Mile Fun Run / Walk

Hunter Springs Park (Picnic Pavilion)

104 NE 1st Avenue, **Crystal River, Florida**

5k Awards (T-Shirts guaranteed to all pre-registered)

Overall Individual Male / Female

Overall Masters (40+) Male / Female

Awards 3 Deep in 5 year Age Groups (9-under thru 75-up)

Entry Fee Register on-line: www.raceit.com

\$15 Pre-Registered (received by Nov 6th)

\$13 CRR Adult Club Member (Advanced Registration Only)

\$20 Race Day Registration (All Athletes)



More Info at www.citrusroadrunners.org

Contact

Dorothy Pernu (352) 795-8344 email: dorothy.pernu@hma.com
DRC Sports (352) 637-2475 email: info@drcsports.com

Make checks payable to: Citrus Road Runners
P.O. Box 94
Inverness, FL 34451

T-SHIRT SIZE () S () M () L () XL

NAME _____ DOB ____ / ____ / ____ AGE (ON RACE DAY) _____ SEX _____

ADDRESS _____ E-MAIL _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

Kings Bay 5K RELEASE WAIVER: I understand that Entry Fees are **Non-Refundable & Non-Transferable**.

I know that running a road race is a potentially hazardous activity. I should not enter and run 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 weather, including high heat and humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skate boards, baby joggers, roller skates or blades, animals and radio headsets are not allowed in the race and I will abide by these guidelines. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release the Citrus Road Runners, Chris Moling, DRC Sports, City of Crystal River, Seven Rivers Regional Medical Center, Eckerd Youth Alternatives, Inc. and all other 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 person named in this waiver. I also agree that I may be examined and treated if necessary during the course of the race by qualified race personnel in the event medical problems of any cause arise. The race officials or qualified personnel have the right to remove me from the race if, in their opinion, I may be suffering from a life threatening condition. I understand that the course is open to vehicular traffic and will compete with due care. I agree to return any equipment issued for the event, such as timing chips, or I will pay for their replacement.

SIGNATURE(Parent if under 18 years of age) _____ **Date** _____