



Proudly Presents the 5<sup>th</sup> Annual

# Ovarian Cancer

## 5K Run and 1 Mile Walk

**Saturday, August 14<sup>th</sup>, 2010**

6:00 am Registration & Packet Pick-up

7:30 am 5K Race / 1 Mile Walk start

### Black Diamond Ranch

Off Hwy 491 - 1 Mile North of Hwy 486 **Lecanto, Florida**

**5K Awards** (T-Shirts guaranteed to pre-registered only)

Overall Individual Male / Female

Overall Masters (40+) Male / Female

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

\*Walk Pre-registered will receive a souvenir t-shirt

**5K & Walk Entry Fee** Register on-line: [www.Racelt.com](http://www.Racelt.com)

\$15 Pre-Registered (by August 11<sup>th</sup>)

\$13 CRR Club Member (Advanced Registration Only)

\$25 Race Day Registration (All Athletes)

**Contact** Citrus Road Runners (352) 637-2475



On behalf of the Ovarian Cancer Institute at Georgia Tech University, we invite you to participate in the fifth annual OC 5K Run/One Mile Walk. The proceeds of this event will be used to fund research, support public awareness and help people recognize early signs and symptoms of this silent, but deadly disease. This is an opportunity to do something very meaningful and have lots of fun. Help us battle this disease and capture the spirit of women we know and love who are fighting for their lives. So put on your shoes and we will see you on August 14<sup>th</sup> at Black Diamond.

More info available at  
[www.citrusroadrunners.org](http://www.citrusroadrunners.org)  
email: [info@citrusroadrunners.org](mailto:info@citrusroadrunners.org)

Checks Please enter me in the ( ) 5K Run ( ) 1 Mile Walk Amount Enclosed: \_\_\_\_\_

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

Donation Only: \_\_\_\_\_

T-SHIRT SIZE ( ) S ( ) M ( ) L ( ) XL ( ) XXL is \$2 extra

NAME \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_  
(On race day)

ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
(Used for updates and upcoming races)

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

**OC5K RELEASE WAIVER:** 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, Black Diamond Ranch, RRCA, DRC Sports, Chris Moling, 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 understand that I may be issued a timing chip for use during the event and that I am responsible for returning the chip after the event or agree to pay a replacement fee of \$30. 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. Further, I hereby grant full permission to any and all of the foregoing to use any email, photographs, videotapes, motion pictures, recording or any other record of this event for any purpose whatsoever.

**SIGNATURE** \_\_\_\_\_

(Parent must sign if under 18 years of age)

For Office Use Only \_\_\_\_\_

Method of Payment: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Date Received: \_\_\_\_\_ Amt: \_\_\_\_\_ By: \_\_\_\_\_