

# PARTICIPANT REGISTRATION

## Race Against Domestic Violence

*April 18, 2020*

Hosted by Hidden Sanctuary Village Inc.



**Arrival Time:** 7:30am  
**Race Begins:** 8:30am  
**Location:** Sebastian Municipal Golf Course  
100 Brush Foot Drive  
Sebastian, FL 32958

**\$30 Per Person (pre-registered)**

**\$35 Per Person on the day of the race**

**Group Rate: \$25 per person for groups of 5 or more**

**Make checks payable to: Hidden Sanctuary Village, Inc. PO Box 781, Roseland FL 32957**

Pre-registration packets will be available for pickup on April 17<sup>th</sup> at  
[Runner's Depot](#) – 436 21<sup>st</sup> Street, Vero Beach FL 32960

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Shirt Size: **S M L XL XXL**

### **Medal Awards:**

- First and Second Place Overall
- Top 3 in following age groups:
  - 12 & Under
  - 13-19
  - 20-29
  - 30-39
  - 40-49
  - 50-59
  - 60 >

**SPONSORSHIP FREE ENTRY**

**SPONSOR'S NAME:**

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**Sponsor's Level:**

**PARTICIPANT REGISTRATION**  
**Race Against Domestic Violence**  
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**EVENT DISCLAIMER: Please review the following waiver and disclaimer. By adding your name /signature you accept this waiver and disclaimer.**

WAIVER AND RELEASE

I, (print name) \_\_\_\_\_  
acknowledge that my participation in this 5K Run involves a risk of injury, including bodily injury and I assume the risk of same. On my behalf and on the behalf of my heirs and legal representatives and to the fullest extent permitted by law, I hereby release and discharge Hidden Sanctuary Village Inc. and City of Sebastian Municipal Golf Course and any of their respective directors, officers, board members, employees, volunteers, affiliates, members, agents or representatives of any and from any and all liability for injury, death, or damages and/or any other claim, demands, losses or damages incurred by me in connection with any aspect of the 5K Run.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Parent or Legal Guardian (if registrant is under 18 years of age)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature