



**WHEN:** Saturday, February 16, 2018 @ 8:00am

**WHERE:** Race will Start/Finish at Orchid Island Brewery (2855 Ocean Drive - Vero Beach).  
Route will loop through the historic Riomar neighborhood.

**COST:** \$25.00 in advance / \$30.00 on race day.  
\* Tri-Blend Shirts guaranteed to the **first 100 registered.**

**AWARDS:** Awards will be given out to the Overall Male & Female and Masters Male & Female Winners  
Additionally, awards will be presented to winner and runner-up in the following age groups:  
(12 & under)(13-19)(20-29)(30-39)(40-49)(50-59)(60-69)(70 & over)

**Craft Beer provided at end of race compliments of Orchid Island Brewery. \*21 and Older.**

**Registration:** Register online at: [www.runnersdepotvb.com](http://www.runnersdepotvb.com) or drop-off entry to: Runners Depot of Vero Beach

**Packet Pick-Up:** Friday, February 15, 2018 from 10:00am until 5:00pm at Runners Depot of Vero Beach  
Race day registration and packet pick-up at race site starts at 7:00am

**For More Information:** Call: Shaun Fedder @ (772) 231-3122 / Email: [jedifedder@hotmail.com](mailto:jedifedder@hotmail.com) / Visit: [runnersdepotvb.com](http://runnersdepotvb.com)

**ENTRY FORM - PLEASE PRINT LEGIBLY**  
**CHECKS PAYABLE TO: YOUTH ON A MISSION OF INDIAN RIVER, INC.**

**NAME:** \_\_\_\_\_ **GENDER:**  M  F **RACE DAY AGE:** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_  
**CITY & STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_ **SHIRT SIZE:**  S  M  L  XL

**INCOMPLETE OR UNSIGNED ENTRY/RELEASE FORMS WILL NOT BE ACCEPTED:** In consideration of the acceptance of my entry I, for myself, my heirs, for whom I am guardian of, executors and administrators, do hereby discharge and release Runners Depot of Vero Beach, Run for Fun, Inc., The City of Vero Beach, Youth on a Mission of Indian River, Inc., Orchid Island Brewery, Indian River County and all cooperating businesses, officials, sponsors, producers, volunteers, supporters, organizations, assigns and/or their representatives of all claims, damages, actions, liabilities, costs and/or expenses whatsoever which I may have against them in any way connected with my participation in this event, including travel to or from this event and including injuries which may be suffered by me before, during or after this event. I authorize the officials of the race to use their discretion to have me or my child transported to a medical facility and I take full financial and legal responsibility for this action. I verify that I am physically fit enough to compete this event and that I am medically cleared to participate by my physician. I permit the use of my name, photography and/or recording to be used in connection with this event for any lawful purpose. BY SIGNING THIS RELEASE, I HAVE READ THE ABOVE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARENT SIGNATURE (IF UNDER 18):** \_\_\_\_\_ **DATE:** \_\_\_\_\_