



REGISTRATION FORM

RACE AGAINST DOMESTIC VIOLENCE

APRIL 18, 2020

ARRIVAL TIME: 7:30 AM - RACE STARTS AT 8:30 AM

SEBASTIAN MUNICIPAL GOLF COURSE

100 BRUSH FOOT DRIVE, SEBASTIAN FL

MAKE CHECKS PAYABLE TO:

HIDDEN SANCTUARY VILLAGE INC.,
PO BOX 781
ROSELAND, FL 32957

Pre-Race Packets available for pick up

April 17th 2020 from 10am-5pm

at Runners Depo: 436 21st Street Vero Beach

Name: _____

Date of Birth: _____ Age: _____ Gender: _____

Shirt Size (circle size): SMALL MEDIUM LARGE X LARGE XX LARGE

Email Address: _____ Phone Number: _____

\$30 PRE REGISTRATION \$35 DAY OF RACE

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

Medal Awards: Overall Male & Female, Top 3 in following age groups:

12 & Under, 13-19, 20-29, 30-39, 40-49, 50-59, 60 >

RACE DIRECTOR: KELLY JOHNSON – 772-663-2890

KJOHNSON@HIDDENSANCTUARYVILLAGE.COM

HTTP://WWW.HIDDENSANCTUARYVILLAGE.COM

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.

Signature _____ Date _____

Signature of Parent if under 18 _____ Print Name of Parent _____ Date _____