

Firefighters' 5k Run & Community Walk

SUPPORT THE BUTLER FIRE DEPARTMENT

TIMES

Saturday, November 19, 2016
Late Registration: 7:30-8:15am
5K Run/Community Walk: 8:30am



RACE LOCATION

Butler United Methodist Church
34 E. Main Street
Butler, GA 31006



RACE HOTLINE

478/954-2269
or
butlerfireraceday@yahoo.com

RETURN FORM TO:

Butler Fire Department
PO Box 2414
Butler, GA 31006

5K SHIRT TO ALL PRE-REGISTERED BY NOV. 4, 2016
FREE GYM BAG TO FIRST 150 RUNNERS; DOOR PRIZES
1ST-3RD OVERALL M/F TROPHY; 1ST-3RD TROPHY IN EACH AGE GROUP;
1ST M/F MASTERS AWARD; VETERAN PARTICIPATION AWARDS

ENTRY FEES:

5K run/walk: \$18 After 11/4/16: \$22

SHIRT SIZE:

YOUTH:

- small
- medium
- large

ADULT:

- small XL
- medium 2XL (ADD \$3)
- large 3XL (ADD \$3)

Divisions:

- | | | |
|-------------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 10 & under | <input type="checkbox"/> 30-34 | <input type="checkbox"/> 55-59 |
| <input type="checkbox"/> 11-14 | <input type="checkbox"/> 35-39 | <input type="checkbox"/> 60-64 |
| <input type="checkbox"/> 15-19 | <input type="checkbox"/> 40-44 | <input type="checkbox"/> 65-69 |
| <input type="checkbox"/> 20-24 | <input type="checkbox"/> 45-49 | <input type="checkbox"/> 70-74 |
| <input type="checkbox"/> 25-29 | <input type="checkbox"/> 50-54 | <input type="checkbox"/> 75-79 |
| | | <input type="checkbox"/> 80+ |

First Name _____ Last Name _____ Sex M F

Address _____ Birth date / /

City _____ State _____ Zip Code _____ Age / on race day Veteran: YES NO

Telephone _____ Email Address (Please print) _____

Waiver: In consideration of my and/or my dependent's participation in the Fireman's 5K run & Community Walk, I hereby release and hold harmless THE CITY OF BUTLER to include the Fire Department, and all of its sponsors, their affiliates, agents, employees, and volunteers and all officials concerned for any acts, omissions, or negligence which may result in any bodily injury (including death) and/or property loss of damage incurred by me arising out of or in connection with my and/or dependent's participation in this event. I warrant that I and/or my dependent are in good health and have trained sufficiently for this event. I willingly assume any risk for entering in this event. This waiver extends to all claims of any kind and nature whatsoever, whether known or unknown. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for legitimate purposes. This is a rain/shine event. Money will not be refunded due to weather postponement.

PARTICIPANT _____ DATE _____ LEGAL GUARDIAN (UNDER 18 YEARS) _____ DATE _____