

Salute to Our Troops 5K Run/Walk

Registrations: ___20 Early Bird until Nov 8th, \$25 after Nov 8th___, \$30 Day Of ___ and Students, Families, and Teams \$24___, and Children five and under are free but add \$5 for t-shirt. \$15 Military___.

Time: Registration, 8:00 am. 5K Run/Walk starts at 9 am.

Date: Dec 8th, 2017

Course: Along the Oconee River

Place: Oconee River Greenway.

Awards: There will also be overall male/female awards. In the 5k, awards will be given for most distinguished, overall winner male/female, and age group awards two deep. Top 2 Walkers Overall.

Proceeds will provide education, food, rent, utilities, and medical expenses.

T-shirt size: YM__YL__S__M__L__XL__2X (Add \$2) __3X (ADD \$3)___.

Name _____

Address _____

Gender: M__F__ Age on race day: ___ Date of Birth __/__/__ Race: 1 Mile__ 5K__

City: _____ Address: _____

Phone (____)-____-____ Email: _____

Race Registration: \$ ___ Cash ___ Check ___ Additional Donations \$ ___ Total Enclosed \$ _____

Please make check payable to: Charity Benevolent Fund.

Signed entry form should be mailed to: Charity Benevolent Fund P.O. Box 1014 Gray, GA 31032.

Contact: Larry Manuel E| cbf@mycbf.org, P| (478) 478-444-9781, W| <http://mycbf.org>

Waiver Must Be Read and Signed Before Mailing: In consideration of this entry being accepted, I hereby waive all claims for myself and my heirs against Charity Benevolent Fund, its sponsors, race officials, and volunteers for any illness, which may directly or indirectly result from my participation in these events. I further state that I am in proper condition to participate in the race. I give permission for free use of my name and picture in any broadcast, telecast, or any other visual, oral or written account of the event.

Applicant Signature Required Date (Parent Signature if Under 18)