



## 5K Race/Walk at Venetian Bay

Venetian Bay Town Center, 424 Luna Bella Lane, New Smyrna Beach, FL 32168

# Saturday, October 15, 2016

**REGISTER ONLINE AT  
WWW.RACSMITH.COM**

- Registration will begin at 8:00AM
- Run/walk will begin promptly at 9:00AM
- Awards presentation immediately following run.

**PACKAGE PICK UP:**

**Friday, October 14, 3-7PM**

**The Running Elements**

Port Orange Pavilion

5521 S. Williamson Blvd, Unit 440

Port Orange, FL 32128

EARLY REGISTRATION FEE: \$25

AFTER OCTOBER 8TH: \$30

DAY OF EVENT: \$35

*Early registration includes race t-shirt!*

*\*Availability and size only guaranteed if registered by 10/8/16*

Questions? Contact us at [5krunfortheone@gmail.com](mailto:5krunfortheone@gmail.com)



**REGISTRATION (ONE PERSON PER FORM PLEASE)**

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

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age on Race Day \_\_\_\_\_ Male/Female

Circle Shirt Size Youth / Adult Small / Medium / Large / Extra Large

Race Fee (see above) \$ \_\_\_\_\_ Additional Contribution to GHPRC \$ \_\_\_\_\_

Team \_\_\_\_\_ TOTAL Amount Paid \$ \_\_\_\_\_

(Optional)

Please Make Checks Payable to:

Mail Completed Application to:

**\*Must be postmarked by 9/30**

**GHPRC**

**336 North Woodland Blvd.**

**Deland, FL 32720**

RELEASE (must be signed by participant to participate in race). I understand that I am voluntarily participating in this event that could pose certain risk of physical injury and I agree to assume full risk of any injuries, damages or loss which I may sustain as a result of participating in any or all activities connected with or associated with such an event. I agree to waive all claims that I, or anyone acting on my behalf, may have as a result of participating in this event. I hereby release GHPRC, Community of Venetian Bay, City of New Smyrna Beach, Volusia County, all sponsors, volunteers, and employees from any claims from injuries, death, damage or loss which I may have or which may occur to me arising out of, connected with, or in any way associated with the activities of the event. I agree that GHPRC may use my likeness and the likeness of those I am registering (through photography/video taken at the event) for future promotions of GHPRC. I have read and fully understand the waiver and release. Registrant or Parent/Guardian

Signature \_\_\_\_\_

Date \_\_\_\_\_

**GRACEHOUSE4LIFE.ORG**