



Donut Stations Sponsored by:



Saturday

April 24, 2021

7:00 a.m. Check In/Registration

8:00 a.m. Race Starts

Entry Fees

\$25 Through April 23

\$20 Children under 12

\$20 Law Enforcement employees

\$30 Race Day Registration

Entry Fees are nonrefundable

Awards

Top over all Male & Female

Top 3 in each age group: 9 and under, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, and 70 and older. *All children under 14 must be accompanied by an adult.*

Amenities

Participant medals, T-Shirt, (Availability and size of shirt only guaranteed to those who register by April 9th. Participants not registered by April 9th will receive T-shirts based on a first-come, first-served basis)

Location

Trails Shopping Center

254 North Nova Road
Ormond Beach, FL 32174
Near La Fiesta

Course

The race will begin and end at the back of the trails shopping center. Racers will enjoy a scenic course through the Trails and Tomoka Oaks neighborhoods. Racers can enjoy donuts by Krispy Kreme at the Donut Stations.

Pre-Register on-line at www.RaceSmith.com through April 23 or complete the entry form below and mail it to the Ormond Beach Police Athletic League, 170 West Granada Blvd., Ormond Beach, FL., 32174. Make checks payable to **Ormond Beach Police Athletic League. All proceeds benefit OBPAL youth pro-**

Entry Form

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ PHONE: _____ D.O.B.: _____ AGE (DAY OF RACE): _____

EMAIL _____

GENDER: M ___ F ___ T-SHIRT SIZE: S ___ M ___ L ___ XL ___ XXL ___ Youth (large only) ___

PAYMENT: CASH _____ CHECK # _____ TO PAY BY CREDIT CARD, REGISTER ONLINE AT RACESMITH.COM

INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED. In consideration of my entry being accepted, I intend to be legally bound and do hereby for myself, my heirs, and executors waive all rights and claims for damages which may hereafter accrue to be against Ormond Beach Police Athletic League, City of Ormond Beach, RaceSmith, Inc. and the sponsor for the race which I am entering, any subsidy or political division thereof, its or their respective officers, agents, employees, representatives, successors, assigns and sponsors for any and all damage or injuries which may be sustained and suffered by in connection with my association with entry or participation in the event as it is mentioned above. If I should suffer injury or illness, I authorize officials of the race to use their discretion to have me transported to a medical facility and I take full responsibility for these actions. I attest and certify that I am physically fit and have sufficiently trained for the completion of this event. I hereby grant full permission to any and all of the foregoing to use any photography, videotapes, motion pictures, recordings or any other record of this event for any purpose. Bicycles, baby strollers/joggers, dogs, inline/roller skates are prohibited. I HAVE READ THE ABOVE RELEASE AND UNDERSTAND I AM ENTERING THIS EVENT AT MY OWN RISK

Printed Name: _____ Printed Youth Name: _____

PRE-RACE PACKET PICK UP: FRIDAY, APR. 23RD
THE O.B.P.A.L. HOUSE, 194 CENTRAL AVE. 3:00 PM - 6:00 PM
FOR MORE INFORMATION PLEASE CALL 386 676-3505