



**3rd ANNUAL  
BRANDON KILLINGSWORTH  
"BK" 5K MEMORIAL SCHOLARSHIP RUN/WALK  
SATURDAY, MAY 15<sup>th</sup> 2010 AT 7:30 AM**

**Gleason Park\* Indian Harbour Beach, FL**

**PROCEEDS BENEFIT BRANDON KILLINGSWORTH SCHOLARSHIP FUND**

**AMENITIES:**

- Awesome T-Shirts
- Door Prizes
- Fun Race Packets
- Lots of Food/Refreshments
- Great Awards

**FREE – "Kids Run" after the 5K**

**TIMETABLE:**

**Friday, May 14th – 10:00 a.m. – 6:30 pm**

Packet Pickup & Registration at **Running Zone** across from Brevard Community College on Wickham Rd.

**Saturday, May 15th – Gleason Park, Indian Harbour Bch**

6:00 am Packet Pickup & Registration

7:15 am Late Registration ends

7:30 am 5k Start!!!

8:45 am Kids Run - **FREE!**

\*Awards Ceremony immediately following all races

GLEASON PARK: cross over Eau Gallie Causeway-turn left at 1st light (So. Patrick Dr.)-turn right at 1st light (Yacht Club Dr.) - Gleason Park on right.

**AWARDS:**

Male & Female: Top 3 Overall

Top Masters (40+) Male and Female

Age Groups (top 3 male & female)

8 & Under	25 - 29	50 - 54	75+
9 - 11	30 - 34	55 - 59	
12 - 14	35 - 39	60 - 64	
15 - 19	40 - 44	65 - 69	
20 - 24	45 - 49	70 - 74	

**Fees:**

Early Reg. Fee	\$20.00
Early Reg. Fee w/o t-shirt	\$18.00
Late Reg. Fee	\$25.00
Students	\$15.00 (anytime)
Late Reg. after May 8th	

**BK 5K MEMORIAL OFFICIAL ENTRY FORM**

Send completed entry form with fee to:

Make check payable to: **Eau Gallie High School**

Send to: **Melissa Killingsworth 2761 Hereford Road, Melbourne, FL 32935**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (daytime) \_\_\_\_\_ Email address \_\_\_\_\_

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

Sex:  Male  Female Please check shirt size: Sizes: S M L XL XXL  No Shirt Option

**INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED**

In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which may hereafter accrue to me against the sponsors, officials, volunteers, and supporters of this race and any representatives, successors, or assigns for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the BK 5K Memorial event. If I should suffer injury or illness, I authorize the officials of the race to use their discretion to have me transported to a medical facility, and I take full financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this race. I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, or any other record of this event for any purpose of the event whatsoever. I have read the above release and understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE OF PARENT FOR THOSE UNDER 18

\_\_\_\_\_  
DATE