

21ST ANNUAL REINDEER RUN



**PROCEEDS BENEFIT THE BREVARD COUNTY SHERIFF'S
OFFICE POLICE ATHLETIC LEAGUE**

RACE INFORMATION:

FRIDAY, DECEMBER 9, 2016

**10: 00 AM – 6:30 PM - PACKET PICKUP
and REGISTRATION (cash/or check only)**

RUNNING ZONE

3696 N. Wickham Road, Melbourne
(Across from EFSC)

SATURDAY, DECEMBER 10, 2016

**6:45 AM - REGISTRATION AND PACKET
PICK UP BEGINS**

7:45 AM – REGISTRATION CLOSES

8:00 AM - 5K RUN/WALK

9:00 AM - SCR YOUTH SERIES FUN RUN

9:15 AM - AWARDS PRESENTATION

9:45 AM - DOOR PRIZES

AGE GROUPS:

0-9 10-14 15-19 20-24 25-29

30-34 35-39 40-44 45-49 50-54

55-59 60-64 65-69 70-74 75+



**CHERIE DOWN PARK
8492 RIDGEWOOD AVENUE
CAPE CANAVERAL, FL.**

PRE-REGISTRATION BY 11/30.....\$25.00

Space Coast Runners Receive \$1.00 Discount
Pre-Registration Only

REGISTRATION 12/1 – RACE DAY....\$30.00

SCR KIDS FUN RUN.....FREE

First 500 Registrants Receive Race Shirts

RAIN OR SHINE – No Refunds

REGISTER ONLINE by 12/8/16

[https://secure.runningzone.com/Race/FL/CapeCanaveral/
CapeCanaveralReindeerRun](https://secure.runningzone.com/Race/FL/CapeCanaveral/CapeCanaveralReindeerRun)

**SATURDAY, DECEMBER 10th
8:00 AM START**

www.bcsociety.org

beachteachc104@aol.com

321-360-9936

2016 REINDEER 5K RUN/WALK

Make check payable to: **BCSO PAL**

Send completed entry form with fee to: **Running Zone, 3696 N. Wickham Road, Melbourne, FL. 32935**

OFFICIAL ENTRY FORM

Last Name _____ First Name _____ M.I. _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ E-mail _____

Male _____ Female _____ Age on Race Day _____ D.O.B. _____

Please Check Shirt Size: ___XS ___S ___M ___L ___XL ___XXL

In consideration of my entry being accepted, I intend to be legally bound and do hereby for myself, my heirs, my executors, waive and release all rights and claims for damages which I may have or which may hereafter accrue to me against the City of Cape Canaveral, its tenants, and sponsors of the Reindeer Run, Brevard County Sheriff's Office Police Athletic League, their respective officers, agents, directors, representatives, successors and assigns for any and all damages or injuries which may be sustained and suffered by me in connection with my association with or entry or participation in the 20th Annual Reindeer Run 5K Run/Walk. 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 responsibility for this action. 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 photographs, video tapes, motion pictures, recordings or any other record of this event for any purpose whatsoever. I HAVE READ THE ABOVE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.

SIGNATURE _____

(Signature of parent or guardian is required if participant is under 18 years of age)

DATE _____