

# Super Hero 5K & One Mile Fun Run

Saturday, February 4<sup>th</sup>, 2017  
The Avenue, Viera  
2261 Town Center Avenue, Viera



*The fifth annual Super Hero Run is a family friendly running and walking event to benefit abused and neglected children in Brevard. The event is hosted by the Friends of Children of Brevard, a non-profit 501(c)(3) registered in Florida. All proceeds benefit the abused, abandoned and neglected children of Brevard County and support the Guardian ad Litem Program.*

## Time Table:

### Friday, February 3<sup>rd</sup>

- 10:00am-6:30pm: Packet Pickup & Registration at **Running Zone** (3696 N. Wickham Rd., Melbourne)
- 6:00pm-8:00pm: Carb Loading Party at **UNO Chicago Grill**

### Saturday, February 4<sup>th</sup> – The Avenue

- 6:30 am: Packet Pickup & Late Registration
- 7:15 am: Zumba Warm Up for 1 Mile
- 7:20 am: Late Registration Ends for 1 Miler
- 7:30 am: 1 Mile Run/Walk START!
- 7:45 am: Zumba Warm Up for 5K
- 7:50 am Late Registration Ends for 5K
- 8:00 am: 5K START!
- 9:15 am: Kids Run & Mascot Run!!

**\*\*Immediately following the 5K:**

- Mascot Race- Cheer on your favorite mascot!
- FREE kids run for the little ones
- Awards Presentation
- Superhero Costume Contest!

## Awards:

Top school with the most participation! (both events)  
Top 3 Teams (teams of 4 - must be **co-ed**) (5K only)  
Top 3 overall Male & Female, Top Masters Male & Female,  
Top 3 Male & Female in each Age Group:  
8 & Under, 9-11, 12-14, 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+ (both events)

## Race Fees:

	Until 1/19/17	1/20-2/4/17
Adult Registration- 5K	\$25	\$30
Child Reg. (12 & Under) - 5K	\$15	\$20
Team Registration- 5K	\$22	\$27
Adult Registration- 1M	\$20	\$25
Child Reg. (12 & Under) - 1M	\$12	\$17

## Superhero Challenge – 5K & 1M

Adult Registration	\$37	\$47
Child Registration (12 & Under)	\$19	\$29
Team Registration	\$34	\$44

**Superhero Challenge Medal for all Superhero Challenge FINISHERS!**

## Superhero 5K Registration Form

Register Online: <https://secure.runningzone.com/superhero5k>

**Make Checks Payable to:** Friends of Children of Brevard

**Mail to:** C/O Guardian ad Litem, 2825 Judge Fran Jamieson Way Viera, FL 32940

**Rain or shine,  
NO refunds**

**Select Race:** ☐ 1 Miler ☐ 5k Race ☐ Superhero Challenge (both events) **Note: Only 1 shirt will be provided for SHC**

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

Sex: ☐ Male ☐ Female Age on Race Day \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Team Name \_\_\_\_\_ School Name \_\_\_\_\_

Shirt Size: ☐ Youth Medium ☐ Youth Large Adult: ☐ Small ☐ Medium ☐ Large ☐ XL ☐ XXL

Your donation to Friends of Children helps us provide clothing, beds, bikes, school supplies, holiday gifts, and opportunities to our most vulnerable children. Please considering sponsoring one child for \$20 or making a donation of any amount! Donations are tax deductible to the full extent of the law. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE 800-435-7352

**Additional Donation:** \$20 or other amount \$ \_\_\_\_\_

## 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 (series) 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 Superhero running and walking 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, email, 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 (or Guardian of those under 18) \_\_\_\_\_

Date \_\_\_\_\_