



**December 5, 2015**  
**4:00PM START**

**Wickham Park Main Pavilion**  
Eastern Florida State College, Melbourne Campus

### Entry Fees

Early (by 12/4/2015) \$25  
Race Day (12/5/2015) \$30  
Students K-12 \$15

### Registration

Online at [www.tsicrun4thefuture.com](http://www.tsicrun4thefuture.com)

Or Mail Completed Form to:  
Brevard Schools Foundation  
RUN 4 THE FUTURE 5K  
2700 Judge Fran Jamieson Way  
Viera, FL 32940

### Schedule

**Friday, Dec. 4th 10a-6:30p**  
Packet Pick Up & Registration at  
Running Zone  
3696 N. Wickham Road, Melbourne

**Saturday, Dec. 5th**  
Wickham Park Main Pavilion  
3865 N. Wickham Road, Melbourne  
3:00pm Packet Pick Up & Registration  
3:45pm Late Registration Ends  
4:00pm Start of 5K

**Awards Ceremony**  
Immediately following the race!

### Awards

Medals awarded to top 3 M/F overall,  
top masters (40+) and age groups:

Male & Female  
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+

**Cash Prizes**  
for Top 3 Schools with Most  
Registered Participants!

**BBQ Dinner Included!**

Event benefits the Take Stock in Children Program -  
a drop out prevention, mentoring and scholarship program  
for deserving students in Brevard Public Schools.

RACE MANAGEMENT BY



2015 Registration Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Date of Birth: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Donation Amount: \$ \_\_\_\_\_ School Name: \_\_\_\_\_ Shirt Size: XS S M L XL XXL

**Participant Waiver:** 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 Strides for Education 5K Run/Walk 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

Date

Parent/Guardian Signature (if under 18)