



# KIDS MARATHON & HALF MARATHON

For Kids 12 Saturday, October 1st, 2016 & Under 7:30 am

### KIDS HALF MARATHON KIDS MARATHON DOUBLE DOG DARE

1.31 MILES 2.62 MILES Both!

Thursday & Friday September 29<sup>th</sup> & 30th 10:00 am – 6:30pm

Packet Pickup & Registration at Running Zone (across from the King Center on Wickham Rd.)

#### Saturday, October 1st,

Schechter Center, Satellite Beach

6:00 am Packet Pickup & Registration 7:20 am Late Registration ends 1.31 Half Marathon Start!!!

2.62 START to follow Half Marathon



## LONG DOGGER MEDALS FOR ALL FINISHERS!

SPECIAL DOUBLE DOG DARE MEDAL FOR ANYONE COMPLETING BOTH DISTANCES

NEW MEDAL DESIGNS!

 FEES:
 Until 9/30
 Race Day

 1.31 or 2.62
 \$15
 \$20

 Double Dog Dare
 \$25
 \$30

Register Online: Runningzone.com

\$250 to Largest School Participation!

#### BENEFITS: BOYS & GIRLS CLUB OF AMERICA

LONG DOGGERS KIDS MARATHON & HA Mail to: Running Zone 3696 N. Wickham Ro	ad, Melbourne, FL 32935	Y FORM Make check pa	yable to: Running Zone
NameAddress	Citv	- State	Zip
Address City State Zip Phone (daytime) Parent's Email address			
Sex: ☐ Male ☐ Female Date of	Birth/	Age on Race Day <sub>1</sub>	
School Team Challenge:			
School Team Challenge:KIDS HALF MARATHON (1.31 MILES) KIDS MARATHON (2.62 MILES)			
Please check shirt size:(cotton shirt):	□ Youth Sm □ Youth Med □ Y	outh Lg □ Adult Sm □	Adult Med  Adult Lg
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 Running Zone Race Series 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, emails 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 if under 18		Date
Any parent/guardian wanting to accompany their child may do so free of charge. Please sign the signature line below agreeing to the above waiver.			
Signature	Date	<b>.</b>	











