

# Fight Child Hunger 5K

## INAUGURAL EVENT

SATURDAY, OCTOBER 22, 2016- 7:30 AM START

Eastern Florida State College, Melbourne FL



[www.fightchildhunger5k.org](http://www.fightchildhunger5k.org)

<b>TIMETABLE</b>			
<b>Friday, October 21 – 10:00 a.m. – 6:30 p.m.</b> Packet Pickup & Registration at <b>Running Zone</b> (3696 N. Wickham Rd, Melbourne)			
<b>Saturday, October 22 – Eastern Florida State College</b> 3685 N Wickham Rd, Melbourne, FL 32935			
6:00 a.m.	Packet Pickup & Registration Opens		
7:15 a.m.	Late Registration for 5K Ends		
7:30 a.m.	5K Run Start*		
8:45 a.m.	Walk & Wheels Start		
*Awards ceremony immediately follows race.			
<b>FEES:</b>	<b>Until 10/21</b>	<b>Event Day 10/22</b>	
Adults	\$25.00	\$30.00	
Youth 6-18 yrs.	\$20.00	\$30.00	
Children 5 yrs. and under Free!			
<b>Sorry, No Refunds</b>			
Bring the whole family for a fun morning at the EFSC Pavilion! Raise awareness of the efforts to fight childhood hunger by The Children's Hunger Project and the Sharing Center of Central Brevard. To learn more visit: <a href="http://www.fightchildhunger5k.org">www.fightchildhunger5k.org</a>			
<b>5K AWARDS:</b>			
M-F: Top 3 Overall, Top Masters (40+), Age Groups (Top 3 M-F):			
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	

**OFFICIAL ENTRY FORM**

**Fight Child Hunger 5K**

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Send completed entry form to: Running Zone - 3696 N Wickham Rd, Melbourne, FL 32935

Make check payable to: **Fight Child Hunger 5K**

First \_\_\_\_\_ Last \_\_\_\_\_ Phone (daytime) \_\_\_\_\_

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

Email address \_\_\_\_\_ Sex:  Male  Female

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

Please check shirt size:  YM  S  M  L  XL  XXL



**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 Fight Child Hunger 5K 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/GUARDIAN (FOR THOSE UNDER 18)

\_\_\_\_\_  
DATE

Presented by:

