





7:00 am Start Time

MAY 12, 2018

Random Giveaway: a Dell Laptop

Time Table:

Packet Pickup and Registration:

Tuesday 5/8 to Friday 5/11 (10 am - 6:30 pm)

Running Zone 3696 N Wickham Road Melbourne, FL 32935

(across from the King Center)

Race Day:

Wickham Park Community Center, 2815 Leisure Way, in

Melbourne off Wickham Road

Packet Pickup & Registration 6:00 am

6:30 am KinderCare opens inside Community Ctr

Late Registration for 5K ends 6:50 am

7:00 am 5K Start!!!

The Lil' Gecko Kids Run will take place when all finishers have completed the 5K.

Race Features:

- 15th Anniversary Celebration Party
- Pancakes & Birthday Cake for finishers
- Breakfast provided by Pizza Gallery & Grill
- Free Lil' Gecko run with Zippy the Gecko
- Strawberries & Champagne (finishers 21&Up)
- Race Beneficiary:



For more Information:

RUNNINGZONE.COM/SERIES

Run for the Gecko 5K Registration:

Send completed entry form and check to: Running Zone, 3696 N Wickham Road, Melbourne, FL 32935 All items below must be completed!

(until 5/11) (race day) Individual \$30 \$35 \$20 Kids (Under 12 yoa) \$15 NONE Team Reg/Gecko Club \$25 Take \$5 off your registration with the NO SHIRT option!

Last Name				F1	rst Name			_
Date of Birth	/	/	Age or	n Race Day _	□ Male □ Fer	nale		
Address					City		_ State	Zip
Phone (dayting	me)				Email address			
Shirt: □ XS	\square S \square	$M \square L$	$\square \ XL$	\square XXL \square No	Shirt Option (save \$	\$5) Youth Shirt	∷ □ Youth M	□ Adult S
Team Name _					(Min. of 5 Partici	ipants, one of the (Opposite Sex)	
Elementary/I	Middle S	chool Na	ıme					
		<u>IN</u>	COMPLET	<u>TE OR UNSIGNEI</u>	<u>D ENTRY FORMS WILL NO</u>	T 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 a Running Zone Foundation 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, 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 OF PARENT IF PARTICIPANT IS UNDER 18 SIGNATURE

























