

## TEAM UP FOR PARKINSON'S DISEASE 5K RUN / 1K WALK

Saturday, April 29<sup>th</sup>, 2023 **8 AM - Start** Brevard Veterans Memorial Center 400 S Sykes Creek Pkwy, Merritt Island, FL

Race Amenities:	Timetable:
<ul> <li>T-shirts for 5K participants (guaranteed if registered by 4/10)</li> <li>Unique Finisher Medal for all participants!</li> </ul>	<b>Friday, April 28<sup>th</sup></b> – Running Zone <i>(3696 N. Wickham Rd., Melbourne)</i> 10:00 AM – 6:30 PM - Packet Pickup & Registration
<ul> <li>Post-race food and beverage</li> <li>5K Awards:</li> <li>Top 3 Overall M &amp; F, Top Masters (40+) and</li> <li>Age Groups (Top 3 M &amp; F):</li> <li>9 &amp; Under 10-11 12-14 15-19</li> </ul>	Saturday, April 29 <sup>th</sup> – Brevard Veterans Memorial Center (400 S Sykes Creek Pkwy, Merritt Island, FL) 7:00 AM Packet Pickup & Registration Opens 7:50 AM Late Registration Ends 8:00 AM 5K Start!!!
20-2930-3940-4950-5960-6970+	**Awards Ceremony immediately following race 10 AM: 1K Stroll – Untimed event.
Please join us for a 1K Stroll at 10 AM. This is an untimed event. RACE MANAGEMENT BY	Fees:Through 4/28Race Day5K Adult\$30\$355K Child (12 & Under)\$25\$301K Stroll\$10\$15SORRY, NO REFUNDS.
	e to: Brevard Parkinson's Alliance IK Stroll
Name:	
	// Age on Race Day:
Email address	Phone
AddressCity	

## INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all rights and claims for damages or injuries that I may have against the Event Director, RunSignup.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees. I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typically found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. I certify as a material condition to my being permitted to entry this and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition. In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree to abide by the Center for Disease Control (CDC)'s recommendations for the prevention of the sevent of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization. As it applies to my participation in this race, I agree to abide