

Listen to Your Heart 5K Run/Walk
January 28, 2012 at 8:00AM

Race Information: The race will begin and end at Northeast Park, 400 NE 16th Ave Gainesville. The course will wind around the Historic Duck Pond Neighborhood and will be chip timed.

Registration and Packet Pick-up Information: Participants can pre-register at <http://www.active.com/5k-race/gainesville-fl/listen-to-your-heart-5k-runwalk-2012>, or can mail in a race registration form. Race packets will be available for pick-up the day before the race, on Friday, January 27, 2012, from 5:00 PM-7:00 PM at **ITM Group, 225 SW 7th Terr Gainesville, FL** OR between 7:00 AM and 7:45 AM on race day.

Additional Information: Questions can be directed to Tyran Butler at tyranbutler@gmail.com or 386-365-4316.

NAME: _____ **AGE:** _____ **SEX:** _____

PHONE: _____ **E-mail:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Check one: Runner: _____ **Walker:** _____

T-Shirt Size (circle one): **S** **M** **L** **XL** **2XL** **3XL**

Registration Fee (s): _____ **\$25.00**

Team Information

Group of 10: _____ **\$200.00**

Organization: _____ **Contact Person:** _____

Phone: _____ **E-mail:** _____

| Name | Circle One | | T-Shirt Size | | | | |
|------|------------|--------|--------------|---|---|----|-----|
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |
| | Runner | Walker | S | M | L | XL | 2XL |

Make checks payable to: Delta Sigma Theta **Total Amount Paid:** _____

Please sign and return the waiver statement below:

I know that running a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I assume all risks associated with running this event. Having read this waiver and knowing these facts and in consideration of your accepting my entry fee, I, for myself, and anyone entitled to act on my behalf, waive and release the Gainesville Alumnae Chapter of Delta Sigma Theta Sorority, Inc, the American Heart Association, and all sponsors, their representatives and successors, for all claims or liabilities of any kind arising out of my participation in this event.

Signature: _____

Date: _____