

# 12<sup>th</sup> Annual Run for Runaways

5K Run and 1 Mile Walk • Saturday, March 7<sup>th</sup>, 2009

Proceeds to Benefit Family Resources



## Manatee Runaway Shelter

Downtown Bradenton, Waterfront

Mattison's Riverfront Grille

1200 First Avenue West, Bradenton, FL

## EVENT SCHEDULE

Race Starts at 8:00 a.m. • Amenities & Awards • Colorful Custom Designed T-Shirts *guaranteed* for the first 200 participants registered.  
• Medals to top 3 in each age group • Trophy for the school raising the most money.

## REGISTRATION FEES

Pre-registration: \$25 (Deadline March 1, 2009); After March 1<sup>st</sup> and day of Run: \$30.00; Fun Walk Registration Fee: \$15.00; BRC, MTC Members and Manatee County Elementary, Middle and High School Students: \$18.00 if registered before March 1<sup>st</sup>, 2009.

Register on line at: [www.runnergirl.com](http://www.runnergirl.com) or by mail.



Please complete separate registration form for each participant

I'm paying cash (on race day only)

I'm paying by check: Check #: \_\_\_\_\_

I'm paying by credit card:

Visa

MasterCard

American Express

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please make your check payable to: Family Resources, Inc. and mail your**

check and registration form to: Terri Davis, Family Resources Run for Runaways, 362 - 6<sup>th</sup> Avenue West, Bradenton, FL 34205 Phone: 941-708-5843  
Students/School Staff please designate the school you are with.

School: \_\_\_\_\_

Your age on Race Day: \_\_\_\_\_ Gender: M  F

Which Event are you participating in?  5K Run  1 Mile Walk

**WAIVER:** In consideration of acceptance of this entry, I for myself, my heirs,

devises, executors, administrators and assigns hereby waive, release and discharge any and all claims against the race organizers, sponsoring or conducting this event, or their employees, representatives, or successors, any and all damages or injuries I may suffer.

If I should suffer such 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 responsibility for this action. I hereby grant permission for the use of my name and picture in any

broadcast, brochure or account of this event. By signing this form, I agree that for safety reasons headphones, strollers, baby joggers, bicycles and animals are not permitted in this event.

SIGNATURE (Parent if under 18): \_\_\_\_\_ DATE: \_\_\_\_\_