



South Miami Hospital

BAPTIST HEALTH SOUTH FLORIDA



SUNDAY JUNE 1, 2014 START TIME 7:00pm

7301 SW 57 CT South Miami FL, 33143

Mail completed entry form with fee payable by check or money order to:

To pay with a credit card please visit TeamFootWorks.org

TeamFootWorks
Attn: Registrations
5724 Sunset Drive
South Miami FL, 33143



ENTRY FEE INCLUDES

Tech Shirt for the first 1200 who register and access to Post-Race Celebration.

THE COURSE

Run through the quiet and beautiful South Miami neighborhood, ending next to Town Kitchen & Bar

AWARDS

Overall male and female awards and gift cards for top three in each age group.

AGE GROUPS/AWARDS

10 and under, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75 & Over

PACKET PICKUP

Packets will be available starting at 10:00am on Saturday May 24 through May 31 during store hours at FootWorks in South Miami (5724 Sunset Drive) or at registration tent on race day at 57 CT and Sunset Drive starting at 4:00pm.

KIDS FUN RUN

2-3 yrs. run 100 ft, 4-5 yrs. run 200 ft, 6-7 yrs run 400ft, and 8 yrs run 800 ft. Entry fee includes t-shirt in youth sizes, medal, and special fun zone including a bounce house and slide. Pick up your shirt during Packet Pickup or at the Race Site on Race Day starting at 4pm.

REFUNDS, EXCHANGES, AND TRANSFER POLICY

Absolutely no refunds, exchanges, or transfers.

CANCELLATION POLICY

Race Management reserves the right to postpone or cancel the event due to events out of Management's control such as a natural disaster or other emergencies. No refunds will be issued under these circumstances. Management may also alter the course and distances for the safety of the athletes.

NEED MORE INFO?

For more information or additional assistance, contact Eddie Suarez eddie@teamfootworks.org

2014 SOUTH MIAMI HOSPITAL TWILIGHT 5K

OFFICIAL USE ONLY:

Last Name: _____

First Name: _____

EMAIL: _____

Mailing Address: _____

Suit/Unit#: _____ City: _____ State: _____ Zip: _____

Gender: M F Date of Birth: ____/____/____

Cell Phone Number: (____) _____ Emergency Contact: _____ Emergency Contact Number: (____) _____

RACE FEES

through May 31

Raceday June 1

<input type="radio"/> Adult 5K	\$30	\$40
<input type="radio"/> 18 & Under 5K	\$20	\$25
<input type="radio"/> Kiddie Dash (Kids Under 8)	\$10	\$15
<input type="radio"/> Baptist Employee	\$25	\$35

EMPLOYEE BADGE# _____

CIRCLE YOUR TSHIRT SIZE

Youth Cotton

YS | YM | YL

Womens Tech

S | M | L | XL

Mens Tech

S | M | L | XL | 2XL

Waiver - Required

I know that participating in a run/walk event is potentially hazardous. I will not enter and participate unless I am medically able and properly trained. I warrant I am fit and able to safely complete the event. I assume all risks associated with the event, including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course. All of these risks are known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my entry, I, for myself, and anyone acting on my behalf, waive, release and hold harmless TeamFootWorks, the Road Runners Club of America, all suppliers, all sponsors, and its affiliates, the municipalities in which the event is held, all the aforementioned named parties' respective directors, officers, employees, agents, assigns, representatives and successors and any official or group associated therewith, from and against all claims, damages, liabilities, costs and expenses, of any kind, including reasonable attorneys' fees, arising out of my participation in this event even though that liability may arise out of my negligence or carelessness, and/or the negligence of carelessness of any individual or organization named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, verbal or written statements, or any other record of this event, for any legitimate purpose. I am of legal age, have read this release, fully understand it, and freely agree to all of its terms.

Signature of Applicant

Date

Signature of Parent or Legal Guardian (if applicant is under 18)

Date