

jacksonville registration form

One registration form per person (Photocopies are acceptable)

Mail forms postmarked by September 30th to:

Great Candy Run - Jacksonville
9786 S Holland Street, Littleton, CO 80127

OFFICIAL USE ONLY

Bib #:

Initials:

ChampionChip Number

participant information

Age (on Race Day)

Birthdate (00/00/0000)

First Name

Last Name

Telephone Number

Sex

T-Shirt Size

MS MM ML MXL
WXS WS WM WL WXL

Street Address

City

State

Zip

Email Address

registration information *(add \$5 if registering Race Day)*

\$40 Adults (13 & Over)

\$30 Kids (12 & under) / Adults (60 & over)

\$10 InMotion 1 Mile Kid Run
(12 & under --- not timed and no t-shirt given)

5K Run/Walk

Stroller Division
*(stroller pusher
only register here)*

Cash prizes for top runners and medals awarded to overall and age division finishers. Also, medals awarded to Kids Fun Run participants!

packet pickup *(indicate where you plan to pick up your race packet)*

Orange Park

San Marco

Jax Beach

Baymeadows

Town Center

Race Day

waiver & release

In consideration of the acceptance of my entry in the 2015 Great Candy Run, I, for myself, my executors, administrators and assignees, do hereby release the Great Candy Run, Fetal Health Foundation, City of Jacksonville, Sweet Pete's, Sweet Pete's The Show, and any other contributing sponsors and supporters of this race and their respective officers, members, agents, volunteers and employees from all claims arising or growing out of my participation in the 2015 Great Candy Run. I attest and verify that I have knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in this event. I also give permission for future use of my name and picture in any broadcast, video, or print media account of the event. I understand that the entry fees are non-refundable.

X _____

Signature (if under 18, MUST be signed by parent or legal guardian)