



LHS Soccer

5K and 1 Mile Fun Run

January 11, 2020 @ 8:00 am

Lowndes High School
1606 Norman Drive
Valdosta, GA 31601

All proceeds will benefit the LHS Soccer Teams

Packet pickup: 7:00am day of the event at the visitor's side of the football stadium by the gate

Register Online or mail in application below (mail to LHS Attn: Pamela Brown)

~Check payable to LHS Soccer (please put name/event in memo line)

~Credit Cards can be used online

First Name _____ Last Name _____.

Street Address _____.

City _____ State _____ Zip Code _____.

Date of Birth (mm/dd/yy) _____ Age _____.

Sex (circle) M F

Shirt Size (circle 1) YS YM YL AS AM AL AXL AXXL (add \$1.50)

Entry Fees:

\$20 Before January 4, 2020 (\$10 for the mile fun run)

\$25 After and Race Day Entrants (\$15 for the mile fun run) *****Please note*** No shirt is guaranteed for entries received after January 4.**

Age groups 10 & Under, 11 to 14, 15 to 19, 20 to 29, 30 to 39, 40 to 49, 50 to 59, 60 to 69, 70 & Over *awards for first place in every division

PLEASE READ AND SIGN THE PARTICIPATION WAIVER BELOW

I know that running in the LHS Soccer road race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates and roller blades are not allowed in the race and I will abide by this guideline. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release LHS Soccer officials and volunteers, the city of Valdosta, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature (parent or guardian required if under 18)

_____ Date _____

Questions? Email Pamela Brown at pamelabrown@lowndes.k12.ga.us