

# Substance Awareness Center 5K Run/Walk

Saturday, September 30<sup>th</sup>, 2023

7:30 AM – 5K Start

South Beach Park

1702 Ocean Drive, Vero Beach, FL 32963



## Time Table:

**Friday, September 29<sup>th</sup>: Runner's Depot**

10 AM - 5 PM: Early Packet Pickup and Registration

**Saturday, September 30<sup>th</sup>: South Beach Park**

6:30 AM: Late Registration & Packet Pickup Opens

7:15 AM: Late Registration & Packet Pickup Closes

7:30 AM: 5K Start!

**\* Awards Ceremony Following 5K**

## Awards:

Overall Top Male and Female

Age Group (Top 3 M/F): 13 and under, 14-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, 80+

Top Fastest Team (Co-ed, minimum of 4)

**To Benefit: The proceeds generated from the SAC 5K Run/Walk support the Substance Awareness Center's prevention, treatment, and recovery support programs offered to the community of IRC.**

**Please consider making an additional donation (see below).**

## Race Amenities:

- Cool T-shirts (\*Guaranteed for first 100 registrants)
- Awesome Awards
- Food & Beverages post-race

Fees:	Until 9/29	Race Day
Adults	\$30	\$35
Child (12 & under)	\$15	\$20
Team	\$25	\$30

**SORRY, NO REFUNDS.**

## **SAC 5K - Official Entry**

Mail entry form with fee to: *Running Zone - 3696 N. Wickham Rd, Melbourne, FL 32935*

**Make check payable to: Substance Awareness Center**

**Would you like to make an additional donation to benefit the Substance Awareness Center Program?**

**Donation Amount:** \_\_\_\_\_

First: \_\_\_\_\_ Last: \_\_\_\_\_

Sex: ☐ Male ☐ Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Race Day: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

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

T-Shirt Size: ☐ Small ☐ Medium ☐ Large ☐ XLarge ☐ XXL ☐ Youth Medium

## **INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED**

In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which may hereafter accrue to me against the sponsors, officials, volunteers, and supporters of this race and any representatives, successors, or assigns for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the Substance Awareness Council (SAC) of Indian River County (IRC) 5K Walk/Run. If I should suffer 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 financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this event. I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, or any other record of this event for any purpose of the event whatsoever. I have read the above release and understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk.

SIGNATURE

SIGNATURE OF PARENT/GUARDIAN (FOR THOSE UNDER 18)

DATE