

CITY OF CAPE CANAVERAL PRESENTS THE 25TH ANNUAL









SATURDAY, DECEMBER 12, 2020 - 8:00 AM

Proceeds benefit The Brevard County Sheriff's Office Charity, Inc. - YDC Program.

PRE-REGISTRATION BY 11/16: \$25 **REGISTRATION 11/17-12/11:** \$30

RACE DAY: \$35

YOUTH FUN RUN: FREE!

First 600 Registrants Receive Race Shirts

RAIN OR SHINE - No Refunds

SCR Receive \$3 OFF

BEST OVERALL: 1st, 2nd & 3rd Male and Female Masters, Grand Masters & Senior Grand Master

AGE GROUPS:

0-9 10-14 15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54

55-59 60-64 65-69 70-74 75-79 80+

NEW CO-ED TEAM DIVISION: Best Finishing Team of 4 SIGN UP AS AN INDIVIDUAL JUST INCLUDE A TEAM NAME!

PACKET PICKUP & REGISTRATION

FRIDAY, DECEMBER 11, 2020

10: 00 AM - 6:30 PM - (cash/or check only)

RUNNING ZONE

3696 N. Wickham Road, Melbourne (Across from EFSC)

RACE SCHEDULE

SATURDAY, DECEMBER 12, 2020

6:45 AM - REGISTRATION AND PACKET PICK UP BEGINS

7:45 AM - REGISTRATION CLOSES 8:00 AM - 5K RUN/WALK START

9:00 AM - YOUTH FUN RUN

9:15 AM - AWARDS PRESENTATION

9:45 AM - DOOR PRIZES

*Schedule may change due to State and CDC guidelines

CHERIE DOWN PARK

__ TEAM OF 4 MUST BE CO-ED & EACH MEMBER MUST COMPLETE REGISTRATION FORM

8330 Ridgewood Avenue, Cape Canaveral

HOLIDAY COSTUMES ENCOURAGED!!!

Online Registration open until 12/10/20 https://secure.runningzone.com/ MORE INFO: beachteachc104@aol.com or 321-360-9936

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE" 1-800-HELP-FLA (435-7352)

> The Brevard County Sheriff's Office Charity, Inc. is recognized as a not for profit corporation section 501©3 charitable organization# 85-8012598732C-2. BCSO Charity Inc.

SEND COMPLETED ENTRY FORM WITH FEE TO: RUNNING ZONE, 3696 N. WICKHAM ROAD, MELBOURNE, FL. 32935

3	CHECKS PAYABLE TO: Brevar WRITE: ** REIN	d County Sheriff's O DEER RUN** IN MEM	ffice Charity, I	Inc.	
Last Name:	First Name:	M.I		20 Reindeer Ru	n 5k
Address:				Official Entry Fo	
City:	State: Zip Cod	e:		SPA	CE A
Phone:	E-mail			RUNNING DE LES	.CE ↑ \ST • NERS
M: F: Age on R	ace Day: D.O.B:// Sh	irt Size: XS S M	L XL XX		

Check One: Virtual Race In-person	PLEASE INCLUDE AN ADDITIONAL \$5 IF YOUR WOULD LIKE YOUR SHIRT TO BE SHIPPE
n consideration of my entry being accepted, I intend to b	e legally bound and do hereby for myself, my heirs, my executors, waive and release all rights and claims

damages which I may have or which may hereafter accrue to me against the City of Cape Canaveral, its tenants, and sponsors of the Reindeer Run, Brevard County Sheriff's Office Police Athletic League, their respective officers, agents, directors, representatives, successors and assigns for any and all damages or injuries which may be sustained and suffered be me in connection with my association with or entry or participation in the 25th Annual Reindeer Run 5K Run/Walk. 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 responsibility for this action. I attest and certify that I am physically fit and have sufficiently trained for the completion of this event. I hereby grant full permission to any and all of the foregoing to use any photographs, video tapes, motion pictures, recordings or any other record of this event for any purpose whatsoever.

I have read the above and understand that I am entering this	S EVENT AT MY OWN RISK.	
SIGNATURE	DATE	