SPOOKY 5K



Saturday, October 15th, 2022 7:30 AM - 5K START



Viera High School

6103 Stadium Parkway, Melbourne, FL

Join us for a fun walk/run to raise money for our 2022 United Way Campaign!!!			100% of the proceeds go to the United Way of Brevard, a 501(c)3 charity organization			
TIME TABLE: Friday, October 14 th 10:00 AM - 6:30 PM Packet Pickup & Registration at Running Zone 3696 North Wickham Road, Melbourne, FL			T-SHIRTS, RAFFLES, LIGHT BREAKFAST, & FUN!!! *First 100 participants will receive a shirt AWARDS:			
Saturday, October 15 th – Viera High School: 6103 Stadium Parkway, Melbourne, FL 6:30 AM Packet Pickup & Late Registration Opens 7:15 AM Packet Pickup & Late Registration Ends 7:30 AM 5K Start *Awards Ceremony immediately following the race			Age Groups (12 & Under 13 - 17 18 - 24 25 - 29	40 - 44 65 - 69 45 - 49 70+ 50 - 54		
FEES: Adult 5K Run/Walk Child (5 -12 years old**) *Save \$5 with No T-shirt Op **Kids under 5 are free	Until 10/14 \$30.00* \$15.00* tion Until 10/14	Race Day \$40.00 \$20.00	BesSca	COSTUME CONTEST:Best Couples CostumesScariest Costume		
Virtual 5K Register online	\$30.00 e at www.runnin	Race Day gzone.com		st Original Cos t Kids Costum		RUNNING ZONE

Rain or Shine, No Refunds.

OFFICIAL ENTRY FORM - SPOOKY 5K

CHECKS PAYABLE TO: United Way

MAIL TO: Running Zone, 3696 N. Wickham Rd, Melbourne, FL 32935

First:	_ Last: _				
Sex: Male Female Date of Birth:	/	/	Age on Race Day:		
Address:	_ City:		State:	Zip:	
Phone: Email:					
Γ-Shirt Size (please circle): Small Medium	Large XL	XXL	No Shirt Option (-\$5 off)		
Additional Donation: ☐ \$1.00 ☐ \$3.00 ☐ \$5.	.00 🗆 \$10.00	\$	(Fill in \$ Amount)		

INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED

In consideration of my being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executives, waive all rights and claims for damages which may hereafter accrue to me against the sponsors, officials, volunteers and supporters of this race an any representatives, successors, or assigns for any and all damages, illness, or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the United Way Spooky 5k event. If I should suffer injury or illness, I authorize the officials of the event 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 race. I hereby grant full permission to any and all of the foregoing to use any photographs, videos, 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 race at my own risk.

SIGNATURE	SIGNATURE OF PARENT FOR THOSE UNDER 18	DATE	