



# "HOME STRETCH"

5K Race to Benefit

**National Veterans Homeless Support**

Sunday, November 13<sup>th</sup>, 2022 - Race begins at 8:00 AM

Eau Gallie Square

1453 Highland Avenue, Melbourne, FL



## Early Packet Pickup & Registration @ Running Zone

(3696 North Wickham Road, Melbourne, FL)

Friday, November 11<sup>th</sup> - 10:00 AM - 6:30 PM

Saturday, November 12<sup>th</sup> - 10:00 AM - 5:00 PM

## Race Day @ Eau Gallie Square

(1453 Highland Ave, Melbourne, FL)

Sunday, November 13<sup>th</sup> - Timeline:

6:30 AM Packet Pickup & Late Registration Opens

7:45 AM Packet Pickup & Late Registration Ends

8:00 AM 5K Start

## AWARDS: (Immediately following the race)

Top 3 Overall M & F

Top Masters (40+) M & F

Largest Team (1)

Top Team (1)

Top 3 Fastest Limb-Impaired Veterans

Age Groups (Top 3 M & F):

8 & Under	25 - 29	50 - 54	75 - 79
9 - 11	30 - 34	55 - 59	80+
12 - 14	35 - 39	60 - 64	
15 - 19	40 - 44	65 - 69	
20 - 24	45 - 49	70 - 74	

Register online at: [www.runsignup.com/homestretch](http://www.runsignup.com/homestretch)

## To Benefit: National Veterans Homeless Support (NVHS)

Mission: To Eliminate Homelessness Among Veterans in Central Florida.

Providing street level outreach, homelessness prevention, and supportive services for homeless, at-risk, and low-income Veterans and their families since 2008.

## Participant Perks:

- Cool Race Shirt (1<sup>st</sup> 400 runners)
- Finisher & Placer Medals

## FEES:

Until 11/12

Race Day

Adult	\$30	\$35
Children (0-17)	\$25	\$30
Military (Active Duty/Veteran)	\$25	\$30
Team	\$25	N/A
Virtual	\$35	N/A

**SORRY, NO REFUNDS.**

## Home Stretch 5K for Homeless Vets

OFFICIAL ENTRY FORM



Make check payable to: **National Veterans Homeless Support**

Mail completed entry form to: Running Zone, 3696 N. Wickham Road, Melbourne, FL 32935

☐ Adult ☐ Children ☐ Military ☐ Team ☐ Virtual 5K

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

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Team Name: \_\_\_\_\_ (Minimum of 5 Team Members)

Are you a Limb-Impaired Veteran? ☐ Yes ☐ No

Shirt Size (circle): YM YL YXL Adult S Adult M Adult L Adult XL Adult XXL

## 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 Home Stretch 5K for Homeless Vets event. 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 race. 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 FOR THOSE UNDER 18

DATE