

NIRSA DAY 5k

FEBRUARY 20, 2010



WHEN

Saturday, February 20, 2010

8:30 a.m. for 1/4 Mile Kiddie Run

9:00 a.m. for 5K Fun Run/Walk

(Walkers please start behind runners)

WHERE

All events begin and end at the Campus Recreation & Intramurals (CRI) Pavilion on the Georgia Southern University campus in Statesboro, GA. The Pavilion is located on Akins Blvd., which is accessible via the southern entrance to campus off Veteran's Memorial Parkway (i.e., U.S. Hwy 301 Bypass located between State Hwy 67 and U.S. Hwy 25/301). *There is plenty of free parking and showers will be available afterwards to race participants.*

ENTRY FEE

5K Fun Run/Walk

\$15.00 Early registration; postmarked by Jan. 30th

\$20.00 Registration Jan.31-Feb.6th

\$10.00 Students (with ID)

\$2.00 Discount for Statesboro Pacers

1/4 Mile Kiddie Run

FREE, but you must register to participate; \$5.00 if T-shirt desired.

*Games will be provided for the kids during the 5K Walk/Run

PACKET PICKUP / RACE DAY REGISTRATION

Race day registration and packet pickup will be held at the CRI Pavilion & early packet pickup will be located in the Recreation Activity Center (RAC), on campus, at the following times

Friday, Feb 19th 4:30 - 5:45 p.m.

T-Shirts guaranteed to all pre-registered 5K participants and available to 5 K race day entrants, while supplies last.

COURSE

This fast 5K course runs through Georgia Southern University's scenic campus and has only mild changes in elevation. Course map can be found on the CRI Website:

www.georgiasouthern.edu/services/cri

APPLICATIONS & MORE INFO

Contact Julie Kuykendall at Campus Recreation & Intramurals, (912) 478-5436 or jkuykendall@georgiasouthern.edu

Online registration available at active.com



ENTRY FORM — NIRSA DAY 5K FUN RUN/WALK & 1/4 MILE KIDDIE RUN

Make check payable to: Campus Recreation & Intramurals, P.O. Box 8078, Statesboro, GA 30460

- 5K Run
 5K Walk
 1/4 Mile Kiddie Run (*Free Registration; T-shirt \$5.00*)
 Male
 Female
 Age on Race Day _____
 Date of Birth _____
 Shirt Size:
 YM (youth Med)
 S
 M
 L
 XL
 XXL (\$1.50 extra)

Name _____ Day Phone _____

Address _____ Email _____

City _____ State _____ Zip _____

Club or Team _____

| | |
|-----------------|-------|
| Office Use Only | |
| Cash or Check | _____ |
| Date Received | _____ |
| Receipt Number | _____ |
| Initials | _____ |

In consideration of your accepting me/my child's registration, I hereby for myself, my child, my heirs, executors and administrators waive and release any and all rights and claims for damage I or my child may have against CRI including all representatives who are in any way connected with this event/program. Further, in the event of an injury, I do hereby give permission and consent to authorize such First Aid and/or Medical and/or Hospital care or treatment as deemed appropriate. In addition, I am fully aware of the provisions covered by the fee for this event and I understand that if any emergency arises, any and all additional expenses incurred must be borne or assumed by the participants.

Date _____ Signature _____

Parent or Guardian Signature, if participant is under the age of 18 years