

# Julia Solomon's Senior Project 5k benefiting **American Friends of Magen David Adom**

**(Red Star of David is the Israeli Version of the American Red Cross)**

**Where:** USM Gateway Entrance, Longleaf Trace

**When:** Saturday, March 2nd, 2013

**What Time:** Race packet pick up / race day registration begins at 8:00 a.m.  
The 5k race will begin at 9:00 a.m.

## **Winner Categories:**

Male and Female Overall

Male and Female Master Overall

Male and Female Grand Master Overall

Male and Female Age Group Overall 0-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60+

## **Preregistered 5k Race Participants**

~Pine Belt Participants \$15.00

~Non Pine Belt Pacer Participants \$20.00

## **Day of Race Participants**

~Pine Belt Pacer Participants \$20.00

~Non Pine Belt Pacer Participants \$25.00

**T-shirts:** Guaranteed to pre-register runners.

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Name: \_\_\_\_\_ Age on race day \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

T-shirt size (circle one): S M L

In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I am also aware of and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road. I, for myself and heirs and executors, hereby waive, release and forever discharge the event organizers, sponsors, promoters, and each of their agents, representatives, successors and assigns, and all other persons associated with the event, for all my liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise. I understand that the entry fee is non-refundable and non-transferable. I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, web site images, recordings or any other record of this event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent if under 18 years of age)

**Mail Entries to: Julia Solomon**

**phone: 601-549-2843**

**237 West Canebrake Blvd**

**Hattiesburg MS, 39402**

**Make all checks payable to: Julia Solomon**