

Moultrie YMCA

2009

RACE OF THE SOUTH

10K Race, 5K Fitness Run/Walk & 1 Mile Fun Run

Saturday, September 19th

10K RACE & 5K FITNESS RUN/ WALK START AT 7:30 AM

FUN RUN STARTS AT 9:00 AM

LOCATION:

ALL EVENTS WILL START AND END AT THE MOULTRIE YMCA

REGISTRATION/ENTRY FEE:

PRE-REGISTRATION: **Adult** (14 & over) - \$15 **Youth** (13 & under) - \$10
SAME DAY REGISTRATION: **Adult** (14 & over) - \$20 **Youth** (13 & under) - \$12

EVENT T-SHIRT:

ALL REGISTRANTS WILL RECEIVE AN OFFICIAL 2009 RACE OF THE SOUTH T-SHIRT.
T-SHIRTS WILL BE GUARANTEED TO ALL PRE-REGISTRANTS ON OFFICIAL RACE DAY.

AWARDS:

MALE AND FEMALE OVERALL WINNERS FOR ALL RACES WILL RECEIVE AN AWARD. **(NO Double Dipping)**
AWARDS FOR 1ST, 2ND, & 3RD PLACE FOR EACH AGE GROUP WILL ALSO BE AWARDED.
10K and 5K – 14 & UNDER, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65 & OVER
1 MILE – 7 & UNDER, 8 & 9, 10 & 11, 12 & 13



Contact Person: **Leslie Peretti (229) 985-1154** or E-mail: leslieymca@hotmail.com
www.moultrieymca.org



PLEASE TEAR OFF BOTTOM PART AND RETURN TO YMCA WHEN MAKING PAYMENT

PRE-REGISTRATION

Youth (13 & under) \$10
Adult (14 & over) \$15

SAME DAY REGISTRATION

Youth (13 & under) \$12
Adult (14 & over) \$20

EVENT (please check)

1 MILE
 5K
 10K
 Ghost Runner

Male
 Female

Name: _____ Phone: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Shirt Size _____ Adult _____ Youth _____

**MAIL TO: MOULTRIE YMCA
RACE OF THE SOUTH
601 26TH AVE. SE
Moultrie, GA 31768**

If Colquitt Co. Student/ Faculty, please indicate what school you represent: _____

MAKE CHECKS PAYABLE TO: MOULTRIE YMCA

In consideration of my entry being accepted, I intend to be legally bound and do hereby, for myself, me heirs, and executors, waive all rights and claims for damages which I may have or which hereafter accrue to me against the sponsors or any subsidiary or political subdivision thereof, its or their respective officers, agents, representatives, successors, assigns and sponsors for any and all damages or injuries which may be sustained or suffered by me in connection with my association with or entry or participation in Race of the South. 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 verify that I am physically fit and have sufficiently trained for the completion of this event. I HAVE READ THE ABOVE RELEASE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.

Signature

Date

Parent or Guardian Signature (if under 18)