# Brianna Marie Foundation

## 7th Annual 5K

## ***SATURDAY, MARCH 9, 2019***
## ***AT 7:30 AM***
## Inside Wickham Park

**TIME TABLE:**
**Friday, March 8h 10:00 am – 6:30 pm**
Packet Pickup & Registration at **Running Zone**
(Wickham Road just south of the King Center)

**Saturday, March 9th – Wickham Park**
Wickham Park 2500 Parkway Drive, Melbourne, FL 32935
(The start will be in the back of the park, pavilion #4)

| | |
|---|---|
| 6:30 am | Packet Pickup & Registration |
| 7:45 am | Late Registration for 5k ends |
| 8:00 am | 5k Start |
| 9:15 am | Free Kids Run will begin! |

*Awards Ceremony immediately following the race
***Watch website for raffle and silent auction items!***

**FEES:**

**Groupon Number:** _____

**SORRY, NO REFUNDS**

*Bring the whole family for a fun morning at Wickham Park!! The Brianna Marie Foundation was created to support the advancement of fetal lung therapies, to learn more visit:* www.briannamariefoundation.com

**AWARDS:**
M-F: Top 3 Overall, Top Masters (40+), Age Groups (Top 3 M-F), Top Team (1)

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

**Brianna Marie Foundation 5K** OFFICIAL ENTRY FORM
Send completed entry form to:

contactus@briannamariefoundation.com

Name_____
Address _____
City _____ State _____ Zip _____
Phone (daytime) _____
Email address _____
Sex: ☐ Male ☐ Female Date of Birth _____/_____/_____ Age on Race Day _____
Team Name _____ (Minimum of 5 Team Members)

Please check shirt size: Sizes: ☐YM ☐S ☐M ☐L ☐XL ☐XXL

**Groupon redeemers**:
EMAIL (contactus@briannamariefoundation.com) this form with your voucher to complete your registration. You will receive a confirmation email of receipt. Must be received by 3/1/19 to guarantee shirt size.

RACE MANAGEMENT BY RUNNING ZONE

**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 Brianna Marie Foundation 5K 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