

Braham Area Girl Scouts

4TH Annual

5K Color Run/Walk



Saturday May 19, 2018 9:00 A.M. Race Start

- **RACE STARTS** at Braham Area High School at 531 Elmhurst Ave S, Braham, MN 55006
- **ENTRY FEES**
 - \$10.00 before April 28, 2018 (event t-shirt guaranteed)
 - \$15.00 after April 28, 2018 / Same Day Registration (no guarantee for t-shirt)
 - T-shirts/Additional T-shirts can be purchased for \$8.00
- **CHECK IN, T-SHIRT PICK-UP, SAME DAY REGISTRATION** (no t-shirt guarantee) 8:00am race day @ Braham High School
- **T-SHIRTS** are guaranteed to all pre-registered participants with a postmark by Saturday, April 28
- **PROCEEDS** from this race benefit Braham Area Girl Scouts and River Valleys Girl Scout Council
- **CHECKS PAYABLE TO Braham Girl Scouts**
- **MAIL REGISTRATION FORM AND FEE TO** Braham Girl Scouts; 400 Circle Dr. Braham, MN 55006
- **ANY QUESTIONS CONTACT**
 - Tish Carlson @ 763-244-0450 or e-mail tishywishy@msn.com
 - Tracey Brewer @ 320-515-1829 or e-mail sandgardencandles@gmail.com

Detach and mail bottom portion

ONE FORM PER PERSON PLEASE

Full Name: _____ (____) _____ - _____
Last First Phone (only if we have questions)

Address: _____

E-mail Address: _____

Age on Race Day: _____ DOB: ___/___/___ Sex: Male____ Female____

\$10.00 before April 28 _____

Included T-Shirt (**Pre-Registered by April 29**) ***NO T-shirts will be mailed, pick up day of event***

Unisex Adult: XXXL____XXL____XL____L____M____S____

Youth: XL____L____M____S____

Add'l T-shirts (\$8.00) Must be ordered by April 29 ***NO T-shirts will be mailed, pick up day of event***

Unisex Adult: XXXL____XXL____XL____L____M____S____

Youth: XL____L____M____S____

\$15.00 After April 28 _____ **\$15.00 Same Day Registration** _____ ***X-tra T-shirts may be available for purchase***

I knowingly and at my own risk, hereby apply to enter the Braham Girl Scouts 5K Color Run/Walk and do hereby waive and release any and all claims for injuries, illness or damages that I may incur as a result of my participation in the event against all sponsors, volunteers, Braham Area Schools and organizers (including Braham Area and River Valley Girl Scouts) of the Braham Girl Scouts 5K Color Run/Walk for said injuries. I furthermore certify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate.

Race Participant

Parent/Guardian of participant under 18 years old

ONE FORM PER PERSON PLEASE

Full Name: _____ (_____) _____ - _____
Last First Phone (only if we have questions)

Address: _____

E-mail Address: _____

Age on Race Day: _____ DOB: ___/___/___ Sex: Male ___ Female ___

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