



3rd Annual

...Run to the Market

5K ROAD RACE

**Saturday, May 17th, 2014
Tifton, Georgia**

Registration begins at 7:30 a.m. on the corner of 3rd Street & Tift Avenue at the Atlantic Coastline Train Station.

Registration and Entry Fee:

5K Run – Pre-registration is \$20.00 if received on or before May 9th. Late registration and day-of registration will be \$25.00.

Awards:

5K – Overall Male & Female Winner,
Top Male & Female Masters, Top 3 Males & Females in following age groups: 12 & Under, 13-19, 20-29, 30-39, 40-49, 50-59, 60-69, and 70 & Over

Information Contacts:

Lequrica Gaskins, 229.391.3966
Martha Black, 229.556.7439
Rick Register, 229.382.3266



FARMER'S MARKET

DOWNTOWN TIFTON

**Car Cruise-In
Farmers Market
Children's Activities**

Schedule of Run Events:

8:30 a.m. – 5K Run Starts
9:30 a.m. – Awards Ceremony

T-Shirts:

All 5K participants will receive a race T-Shirt. Sizes are not guaranteed after pre-registration.

Entry Form

Name (Please Print): _____ Male Female

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

Phone: _____ Age: _____ Birthdate: _____ Email: _____

Method of payment: Cash _____ Check _____ (Check # _____)

One T-shirt per participant. Adult sizes: Small Medium LG XL 2XL

Make checks payable to: **Downtown Development Authority.**

Mail check and registration form to: **Downtown Development Authority, 504 Main St., Tifton, GA 31794.**

WAIVER: In consideration of my entry being accepted, I intend to be legally bound and do hereby, for myself, my heirs, and executors, waive all rights and claims for damages which I may have or which may 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 and suffered by me in connection with my association with or entry or participation in the Run to the Market. 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. *****This waiver must be signed in order to participate in this event.**

Signed: _____ Date: _____