



SUMMER KICKOFF & 5K RUN/WALK FUNDRAISER

Saturday May 13, 2017

8am: 5k Check-in

9am: Race begins; 10AM activities begin

11AM: FREE LUNCH

**Races begin and finish at Cedar Lake Camp*

**REGISTER FOR SUMMER DAY AND RESIDENT PROGRAMS, ENJOY SELECTED CAMP ACTIVITIES
PRIZE DRAWINGS: \$50 OFF RESIDENT CAMP, \$30 OFF DAY CAMP, CLC PRIZE PACK (\$40 VALUE)**

Contact Person Name _____

Street Address _____ City _____ ST _____ Zip _____

Phone _____ Cell _____

Email (Please Print clearly) _____

RUNNER INFO: continue on back if more than two

Name	Age	Grade	Birth Date (mm/dd/yyyy)	School	County
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_____	_____	_____	_____	_____	_____
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REGISTER: MAIL TO 235 CONATSER LANE LIVINGSTON TN 38570

REGISTER BY APRIL 30TH AND RECEIVE ONE EXTRA ENTRY FOR PRIZE DRAWINGS

____ Individual 5K with tshirt (deadline May 3rd) \$25/PERSON (Family Max:\$100)

After April 30th:

____ Individual 5K with tshirt \$30/PERSON (Family Max: \$100)

PAY BY CHECK: Make out to CLC (designate 5k in the memo line)

PAY BY CARD: Type of card: _____ Name on card: _____ Card #: _____

Expiration date: _____ Security Code: _____

T-Shirt Sizes: include sizes for all participants

YM ___ YL ___ AS ___ AM ___ AL ___ AXL ___ 2XL

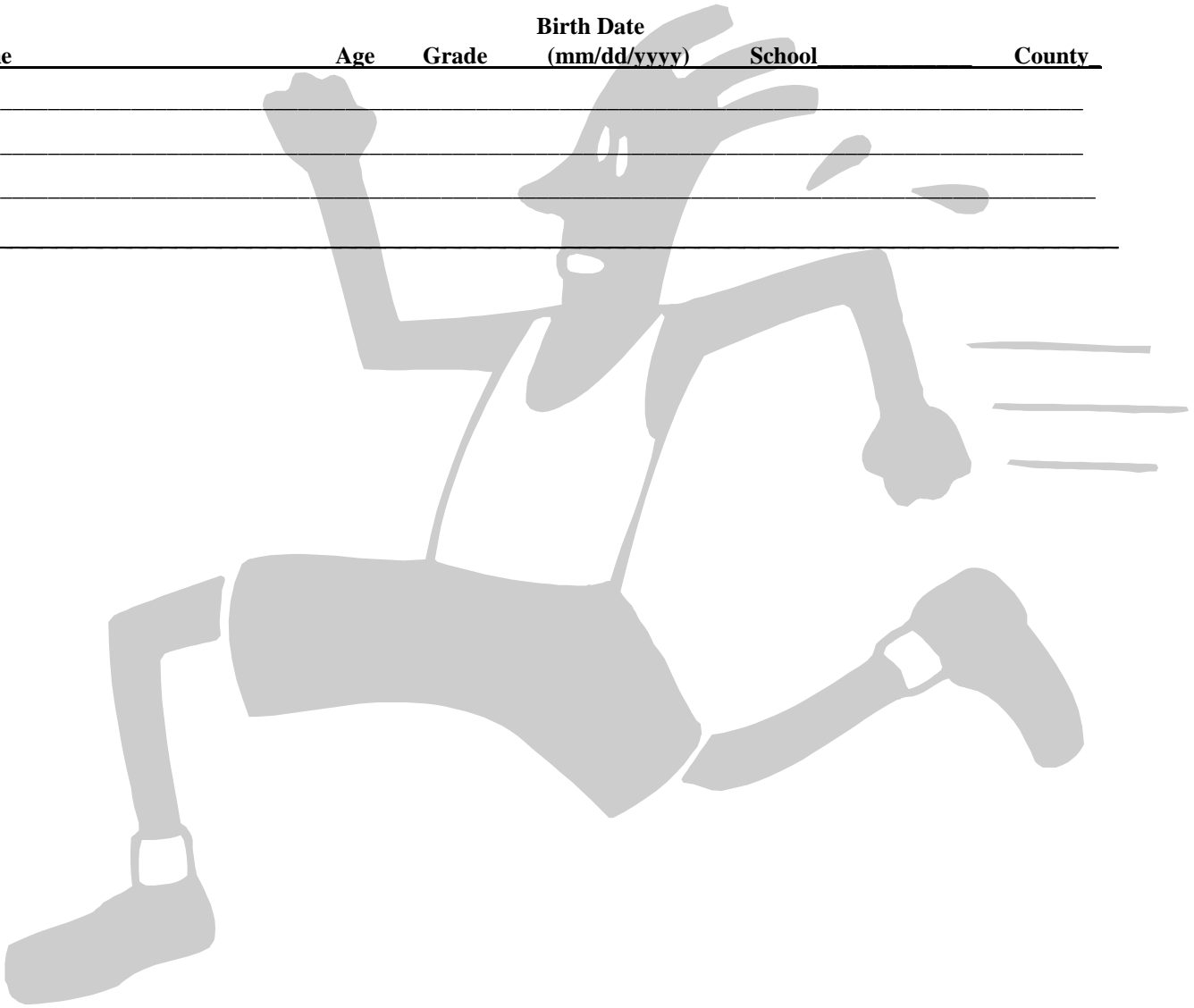
Optional Donation: Scholarship fund \$ _____ General Fund \$ _____ Building Campaign \$ _____

Race total:\$ _____ Donation total:\$ _____ GRAND TOTAL:\$ _____

This registration serves as written consent for the Children's Gospel Hour/ Cedar Lake Camp to use any media for promotional purposes. All participants understand the risk involved with this event and will not hold any of said organization's staff, Board Members or volunteers liable for any injury or other incidents.

ADDITIONAL RUNNER INFO

<u>Name</u>	<u>Age</u>	<u>Grade</u>	<u>Birth Date</u> <u>(mm/dd/yyyy)</u>	<u>School</u>	<u>County</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____



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