



Itty Bitty Kiddie 5K Glow Run

Location of Race: 297 DCCC Rd

Thomasville, NC 27360

First:	MI:	Last:	
Birthdate:	Sex: □M □F	Age Race Day:	
Address:			
City:		State:	Zip:
Home Telephone: ()		Work Tel	ephone: ()
Email:		-	
Emergency Contact Name:			
Emergency Phone Number:			
Team Name:			
The team with the most register	ed 5K participants by March 5	th will receive	a prize (excludes Fun Run Registrants)
I am enclosing \$			
Registration Fees: (please make Mail or Drop off registration			27292 336-249-6688
□Before April 5 th : \$25.00	□Kids Fun Run 10yrs an	d under: \$15.	00 Shirts guaranteed if registered by March 5^{th}
□Day of Race: \$30.00	Start time for Fun Run: 7	:45 pm	
Pre Packet Pick Up: April 4 th	¹ 4:00pm – 7:00pm @ SSD	C Office - 30	6 E US Hwy 64 Lexington NC 27292
Adult T Shirt Sizes: S M I Dry Fit T-Shirts are guarantee		hirt Sizes: S	S M L XL
the event or while I am on the premises of the and all other persons or groups associated wi	e event. I hereby release and hold Smart th the event from any and all liability ass apparel and a head lamp. Children unde	Start of Davidson Cociated with this ever the age of 13 mus	y to me or damage to property which may occur during county, Finish Line Timing, volunteers, sponsors went or otherwise. I also understand that this is to be accompanied by an adult. I grant permission for event for any purpose whatsoever.
Signature	Date		
Signature	Date		
Parent / Guardian signature required if p	participant is a minor)		

For Additional Information: <u>www.partnershipforchildren.org</u>
For Office Use Only

ayment: _	Cash	Check Received by:	Entered Into Race Website:	