



## GO FAR 5K RUN/WALK RACE DETAILS

**When:** Saturday, April 22, 2017

**Time:** One Mile Fun Run at 8:15 a.m.

5K at 9:15 a.m.

**Where:** Eden City Hall/Grogan Park  
308 E. Stadium Drive Eden, NC 27288

**Cost:** One Mile Fun Run= \$10 (\$15 after **3/23/17**)  
5K= \$25 (\$30 after **3/23/17**)

### **Go FAR School Students, Teachers & Families**

1. Complete registration form and return with payment to your GO FAR Coach.
2. Make checks payable to your school.
3. Or register and pay online at [www.rcgofar.com](http://www.rcgofar.com) until 4/17/17 at 5:00pm (\$2.50 convenience fee will be added)

**IMPORTANT:** We must have a completed registration form and signed waiver for **each individual** runner.

**T-shirts are only guaranteed for participants who register by Thursday, April 6, 2017.**

**All registrations are non-refundable.**

### **Community Participants** **(not affiliated with a school or** **child care center)**

1. Complete registration form and return with payment to:  
Rockingham County Partnership For Children  
Attn: Go FAR Registration  
P.O. Box 325  
Wentworth, NC 27325
2. Make checks payable to RCPC.
3. Or register and pay online at [www.rcgofar.com](http://www.rcgofar.com) until 4/17/17 at 5:00pm (\$2.50 convenience fee will be added)

**Parking Information:** The race will start/finish in front of the Eden City Hall. Please pay careful attention to parking signs/barriers. Parking will be available at Osborne Baptist Church (beside Eden City Hall), Central Elementary School, Morehead High School and Holmes Middle School (across from Eden City Hall). Please see attached map for more parking details and race route information.

**No dogs are allowed at the race.**

### **Race Packet Pick-Up :**

**Thursday, April 20, 2017 from 3:00 to 6:30 p.m.**

**Friday, April 21, 2017 from 3:00 to 5:00 p.m.**

Rockingham County Partnership for Children

7572 NC Hwy 87

Reidsville, NC 27320

**To register after 4/17/2017, visit registration booth on race day at Eden City Hall/Grogan Park beginning at 7:30am.**

### **Questions and Contact Information:**

April Cox or Brooke Fuller

Phone: 336-342-9676 ext. 207 or 211

Email: [aprilc@rockinghamkids.org](mailto:aprilc@rockinghamkids.org) or [brookef@rockinghamkids.org](mailto:brookef@rockinghamkids.org)



**Rockingham County**  
**GO FAR 5K & 1 Mile Family Fun Run**  
**Spring 2017 Race Registration**

**Go FAR School Students, Teachers & Families**

1. Complete registration form and return with payment to your GO FAR Coach.
2. Make checks payable to your school.
3. Or register and pay online at [www.rcgofar.com](http://www.rcgofar.com) until 4/17/17 (\$2.50 convenience fee will be added)

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**Runner Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Circle One: Male or Female

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**RACE CATEGORY – SELECT ONE**

**I. 5K**

\$25 – (\$30 after 3/23/17)

If applicable, the school or program the GO FAR runner is affiliated with: \_\_\_\_\_

**2. One Mile Fun Run**

\$10 – (\$15 after 3/23/17)

If applicable, the school or program the GO FAR runner is affiliated with: \_\_\_\_\_

**T-SHIRT– CIRCLE ONE**

Youth Small    Youth Medium    Youth Large

Adult Small    Adult Medium    Adult Large

Adult XL    Adult 2X

**T-shirts are guaranteed for participants who register by April 6, 2017**

**GO FAR Sponsorship**

- I want to sponsor a child's participation in GO FAR. Included in my registration is a \$25 donation.
- I want to support childhood obesity prevention in Rockingham County. Included in my registration is a donation in the amount of \$\_\_\_\_\_.

Race Waiver: I know that running a race can be a hazardous activity. I should not enter and run unless I am medically able and properly trained. I assume all risks associated with running in this race, including, but not limited to: falls, contact with other participants, the effects of weather including high heat and humidity, ice, traffic, lightning, high winds, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, I for myself and anyone entitled to act on my behalf, waive, release, and will hold harmless GO FAR, Inc. and Rockingham County Partnership for Children, Inc., the race organizers, all other sponsors, all volunteers, staff, and officers for all claims, liabilities, of any kind arising from or related to my participation in this race. I acknowledge and agree that the organizers, in their own discretion, may delay or cancel the race or related activities for any reason. I hereby assume all risks of loss, damage, or injury that may be sustained by me while participating in the GO FAR 5K. I agree to the use of my name or photograph in all media and promotion efforts without compensation. IF THE PARTICIPANT IS UNDER AGE 18: I, the undersigned parent/guardian, agree that my son/daughter has my permission to participate in that the parent/guardian has read the foregoing Race Waiver and by signing below intentionally and voluntarily agrees to its terms and conditions. The parent/guardian further represents that my son/daughter is in good physical condition and is able to safely participate in this race. Parent/guardian must sign below for the entrants under the age of 18. By signing, the parent/guardian agrees to the conditions required of the participant.

**PARTICIPANT OR GUARDIAN HAS READ THE FOREGOING AND INTENTIONALLY AND VOLUNTARILY ACCEPTS THIS RACE WAIVER.**

**Signature of participant** \_\_\_\_\_

**Parent signature if participant is under 18 years of age** \_\_\_\_\_

**Date** \_\_\_\_\_