



**Please complete one form per person and mail back by May 20, 2019**

## Strong4Life Superhero Sprint

OFFICIAL ENTRY FORM

Saturday, June 1, 2019 Piedmont Park

5K Run/Walk 9:00AM • 1 Mile Fun Run 10:00AM • Awards 10:45AM

PLEASE PRINT AND MAIL TO ADDRESS BELOW WITH CHECK

*(WE CANNOT ACCEPT THIS APPLICATION IF YOU E-MAIL IT BACK TO US – THANK YOU)*

### OFFICIAL ENTRY FORM (Check One)

- |  |   |
|--|---|
| <input type="checkbox"/> 5K Adult - \$30             | <input type="checkbox"/> 5K Child (12 & under) - \$15             |
| <input type="checkbox"/> 1 Mile Fun Run Adult - \$25 | <input type="checkbox"/> 1 Mile Fun Run Child (12 & under) - \$15 |
| <input type="checkbox"/> Sleep in Superhero - \$40   | Additional Donation \$ _____                                      |

*(Entry fees are non-refundable)*

Make checks and money orders payable to **Children's Healthcare of Atlanta** and mail to:

**Strong4Life Superhero Sprint**

**Children's Healthcare of Atlanta Foundation**

**c/o Michelle Cobb**

**3395 NE Expressway, Suite 100 Atlanta, GA 30341**

Employee ID \_\_\_\_\_

*(For Children's employees use only)*

**Please complete entire application. Incomplete applications may delay receipt of your runner number. *(Please print)***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

\*Age (as of 06/01/2019): \_\_\_\_\_ \*Sex: M F

*\*We have age group winners. Therefore, these two fields are required in order to tabulate the race results.*

Preferred Race Day T-shirt Size: SM MD LG XL 2X 3X 4X **Youth** S M L

Company/Group Affiliation (if applicable): \_\_\_\_\_

In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against Children's Healthcare of Atlanta, officials, sponsors, Strong4Life, City of Atlanta, Georgia, Fulton County, and Racing Solutions, LLC, of the 2018 Strong4Life 5K and 1 mile fun run, and for illness or injury which may result directly or indirectly from my participation. I further state that I am in proper physical condition to participate in this event. I also give permission for the use of my name and/or picture in any broadcast, telecast or other account of this event without compensation.

\_\_\_\_\_  
*Participant's signature Date*

\_\_\_\_\_  
*Signature of parent (if runner is under 18) Date*

