**Race Management by** 







### **Spacecoast Associates for** the Advancement of Zymurgy **Presents the 5th Annual**

# **BOTTOMS UP BEER RUN**

## **4K RUN/WALK**

## **SATURDAY, JUNE 10th @ 6:00 PM** Pavilion #4, Wickham Park on Parkway Drive in Melbourne

Friday, Ju Saturday,	ckup and Registration: Running Zone (3696 N Wickham Rd) ne 9th 10:00 am – 6:30 pm June 10th 10:00 am - 2:00 pm Wickham Park Pavilion #4 June 10 <sup>th</sup> Packet Pickup & Registration Late Registration for 4K ends ID Check deadline - must get a wristband if you want to drink the beer 4K Start!!! Awards Ceremony	• P tl a • B • <u>F</u> • R fr • R <i>f</i> • R • R	he start of the and a full beer Beer and cider Race capped a Race T-shirts a or ALL particip Requested Tsh egistered by <u>5</u> Raffles and Aw <i>Masters M&amp;F, Top 3</i> <i>Under 21, 21-2</i> Beer related co	hirt size guarantee	every 1K race SAAZ Medals ed if erall, Top Age Groups) , 60+ ged
end completed	UP BEER RUN OFFICIAL ENTRY FORM entry form and <u>check payable to: SAAZ</u> rcle_Melbourne_EL 32940		S: 12/31/16 7-4/30/17	Under 21yrs \$5 \$10	21 yrs + \$25 \$30

8615 Stalwart Circle, Melbourne, FL 32940 Online Entry: <u>Secure.runningzone.com</u> Name	1/1/17-4/30/17 5/1/17-5/20/17 5/21/17-6/10/17
Address State Zip	Please register enough beer!
Phone (daytime) Email address	Po
Date of Birth/ Age on Race Day Sex: $\Box$ Male $\Box$ Female Shirt: $\Box$ S $\Box$ M $\Box$ L $\Box$	
Instead of a race shirt I choose to donate \$5 to St. Ba Team Name	

### ortion of proceeds benefit

early to make sure we have SORRY, NO REFUNDS

\$15

\$20

\$35

\$40

St. Baldrick's **Conquer Childhood Cancers** 

#### **INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED**

In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which may hereafter accrue to me against the sponsors, officials, volunteers, and supporters of this race and any representatives, successors, or assigns for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the Bottoms Up Beer Run. 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 financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this race. I hereby grant full permission to any and all of the foregoing to use any photographs, email, videotapes, or any other record of this event for any purpose of the event whatsoever. I have read the above release and understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk.