



SATURDAY, SEPTEMBER 12, 2015
START TIME: 7:00PM

Purpose: GEEF is a 501c3 charitable organization that enhances educational excellence for the students of Harford County Public Schools. Proceeds provide technology for students in need. Information at www.geefinc.com.

- Entry Fee:**
- * Pre-registration \$30.00 prior to August 11; \$35 prior to August 31; \$40 Day of Race
 - * Team Registration \$25.00 per participant prior to August 11; Student Registration (6 – 17) \$15.00
 - * T-shirt and race bag guaranteed to those registered by August 31st
 - * Water on course, bottled water, light refreshments, finish line timing, awards, onsite parking
 - * Run Party till 10 PM, DJ, laser lights, glow items, glow face painting. Food truck - *add'l purchase*
 - * Not responsible for mailed registrations post marked after August 11, 2015.
 - * Registration online at <http://www.eliteracemanagement.com/geef5k>

Registration: 6:00 – 6:30 PM **Race starts at 7:00 PM**

Gathering Place: Equestrian Center, 702 N. Tollgate Rd, Bel Air, MD

Awards: Award for top three overall – Male and Female. Award to the top male and top female in the following age groups: 10 and under, 11-15, 16-19, 20-29, 30-39, 40-49, 50-59, 60 and over.

No headphones, skates, bicycles, or pets allowed on the course

Waiver and release form needed for each runner/walker Please submit a separate form for each participant.

This form may be copied. **Make checks payable to and send completed form to:**

GREATER EXCELLENCE IN EDUCATION FOUNDATION, 260 Gateway Drive, Suite 21A, Bel Air, MD 21014.

Please **DO NOT SEND CASH**. There will be no refunds or confirmations of entry.

Please Print
 Enclosed is \$ _____ for my entry fee and shirt. 5K Run _____ 1 Mile Walk _____ snooze run _____
(Donation)

First Name: _____ Last Name: _____ Email _____

Street Address: _____ City: _____ State: _____ Zip: _____

Age on Day of Race: _____ Gender: M ___ F ___ T-Shirt Size: S ___ M ___ L ___ XL ___ XXL ___

Waiver and Release: I know that running/walking is a potentially hazardous activity and I should not enter this benefit run unless I am medically able and properly trained. I assume all risks associated with running/walking in this event including, but not limited to: falls, contact with participants, the effects of weather, traffic, conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Greater Excellence in Education Foundation, Harford County Public Schools, Board of Education of Harford County, Race Director, Elite Race Management, Harford County Government, Harford County Equestrian Center, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event or resulting from carelessness on the part of persons named in this waiver. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, or any other record of this event for any legitimate purpose.

SIGNATURE OF RACE PARTICIPANT: _____ DATE: _____

IF RUNNER IS UNDER 18, PARENT OR GUARDIAN MUST SIGN: _____