

# REGISTRATION FORM

SCOTTISH RITE FREEMASONS



## 5K RUN / WALK To Benefit Children With Dyslexia

**10<sup>th</sup>**  
ANNIVERSARY

### Saturday, July 23, 2016

**9:00 AM • 207 Deming St., Newington, CT**

*Your tax deductible donation to the Children's Dyslexia Center-CT*

*Helps kids with Dyslexia overcome this disability at no cost to their families.*

**BibTAG Chronotrack Timing, Platt System / USATF Certified #CT10014JHP**

**Online Registration At [www.active.com](http://www.active.com) or [www.runsignup.com](http://www.runsignup.com)**

**Registration Starts at 7:30 AM**

**T-Shirts For The First 200 Pre-Registrations. Trophies for the 1st & 2nd Place. Runners will be given out in each division plus overall Male and Female trophies.**

**DJ Music Provided Before and After Race**

**Pre-Register by 7/19 \$15 - Day of Race \$20**

A full gamut of ups and downs on moderate to challenging hills on a scenic route with plenty of water stations. Course is mile marked: **Start** in Parking Lot at 207 Deming St. Right out of Parking Lot onto Deming St., Left on Candlewyck, Left on Lamp Lighter Lane, Right on Stage Coach Lane to Little Brook Drive, Right on Trout Brook Cir. and loop back onto Little Brook, Right on Little Brook which turns into Culver St. Right on Apple Hill, Right on Courtland Way, Right on Culver St., Right on Deming St., Left at 207 Deming St. (FINISH)

**5K Run**

**Please Check 1**

**5K Walk**

Last Name \_\_\_\_\_

**DIVISION:**

First Name \_\_\_\_\_

9-13

Street \_\_\_\_\_

14-19

City \_\_\_\_\_

20-29

State \_\_\_\_\_ Zip \_\_\_\_\_ Age: \_\_\_\_\_ Male  Female

30-39

Phone \_\_\_\_\_ Email \_\_\_\_\_

40-49

50-59

60-69

70-79

80+

Please make Checks Payable to Childen's Dyslexia Center-CT, P.O. Box 310198, Newington CT 06131-0198



## **PARKING**



Parking Is ONLY Available at LA-Z-BOY Furniture Galleries, 3050 Berlin Turnpike, Newington. A 1-Minute Walk, Follow Signs. Enter By Way of the Sphinx Shriners. Parking is at your own risk.

Any questions, Please Call Bruce Hoffman at 860-205-5900  
or email [bjhoffman1011@gmail.com](mailto:bjhoffman1011@gmail.com)

In consideration of your acceptance of this entry, I, the undersigned entrant, intending to be legally bound hereby for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against race organizers, host town, sponsors, supporters, or any of their agents, successors or assigns for any and all accidents, illnesses or injuries suffered or sustained by me either during or as a result of the race, I attest and verify that I am sufficiently in good physical health to participate in the event; that I am sufficiently trained for this event and its completion; and that my physical health has been verified by a licensed medical doctor.

Runner's Signature (Parent or Guardian must sign if Runner is under 18)

Date

NOTE: Parent/Guardian (NAME: \_\_\_\_\_) agrees to accompany any entrant under 15 years of age to said event