

DECATUR bulldog

Signature



tapes, motion pictures, recordings or any other record of me in this event for legitimate purposes.

Run With The Dogs" 5K is a qualifying run/walk event in the City of Decatur's Grand Slam Fitness Challenge.

decaturga.com/teamdecatur

SATURDAY, JANUARY 9, 2016 The 5K run/walk begins at 9:00 am, rain or shine. Registration will take place in front of Decatur High School beginning at 8:00 am.

All City of Decatur students, parents, alumni, friends, neighbors and runners and walkers of all levels are invited to participate. Participants are invited to run or walk with their dogs in a special group.

All proceeds will be used by the Decatur Bulldog Boosters to help fund the sports programs at Decatur High School and Renfroe Middle School.

PARKING: Parking is available in the DHS upper parking lot off Howard Avenue.

AGE GROUPS: 11 & under, 12-14, 15-19, 20-29, 30-39, 40-49, 50-59 and 60 & over.

AWARDS: To overall 1st place male and female runners, Masters 1st place male and female runners and top male and female finishers in each category. All participants will receive a 100% cotton long-sleeved T-shirt (adult sizes only). **T-shirts are only guaranteed to pre-registered participants.** Dogs participating will receive a special prize.

COURSE: The run/walk will begin and end on North McDonough Street in front of Decatur High School and will run through City of Decatur residential areas. The course will be well marked and supervised by volunteers and the City of Decatur Police Department. Water stations will be positioned along the course and splits will be given at mile points. Refreshments will be available at the finish.

ENTRY FEE: Individuals: \$30 if received by 1.2.16 \$35 late or day of race

City of Decatur Students, Teachers & Employees:

Parent/Guardian (if under 18)

\$20 if received by 1.2.16 \$25 if late or day of race

All entry fees are non-refundable.

CONTACT: Bill Ainslie, 404.213.8624 or ainslie.william@gmail.com, register online at www.active.com

REGISTRATION FORM

(please print – form may be copied, one form per runner, please)

Name	Address			
City	State	Zip	Phone	Email
City of Decatur Stude	ent/Teacher/Empl	oyee: 🗌 Yes	s □ No	T-Shirt Size (circle size): Adult S M L XL
☐ I DO NOT want a T-	shirt. 🔲 l p	lan to bring m	y canine companio	n.
Enclosed is my registration	on fee of \$	<i>A</i>	Additional donation	n \$
Make checks payable to	DBABC and mail to	o: DBABC, P.O.	Box 3241, Decatur	, GA 30031-3241
including, but not limited to, fall	s, contact with other par	ticipants, and the éf	fects of the weather, inc	condition to complete this run/walk and assume all risks associated with my participatio luding high heat and/or humidity, traffic, conditions of the road, all such risks being know eption. In consideration of this entry, for myself and anyone entitled to act on my behalf,

waive and release all race officials, volunteers, sponsors, and any others associated with this event. Furthermore, I hereby grant the agents of this event permission to use photographs, video-