

Stop Child Abuse!

Blue Ribbon 5k Run

& 1 Mile Family Walk

Saturday,

April 21, 2012



Experience the
**Child Abuse Awareness
Healing Fields**
—Helping to Heal—
The Deepest Wounds

Music, Food and Beverage, Goodie Bags, Custom Design Shirt, & Silent Auction

LOCATION:

Walsingham Park - Shelters 7 & 8
12615 102nd Avenue North
Largo, FL 33778-3435

START TIME:

7:30 A.M. Registration
8:30 A.M. 5K Run Starts
1 Mile Family Walk Immediately Following

ENTRY FEE:

\$20 for Adults and \$15 for Kids (18 and under)
Register up to Run Day
*Pre-Registration by March 26, 2011
Guarantees a T-Shirt

AWARDS:

5K-Medals for top three in all age categories.
Best Time Male Runner
Best Time Female Runner

for more info: Kerri Pedersen ~ 727-388-1250 or www.suncoastcenter.org

Sponsored by:



ST. PETERSBURG
EXCHANGE CLUB

Benefiting:



Suncoast Center, Inc.
Total Family Strategy
Parent Aide Program

REGISTER ON LINE:

Active.com



*** REGISTRATION * STOP CHILD ABUSE ~ BLUE RIBBON 5k RUN & 1 MILE FAMILY WALK**

Participant's Name _____ Age _____

Address _____ E-Mail _____

City _____ State _____ Zip _____ Phone (____) _____

Circle Shirt Size: **Adult S M L XL Youth S M L**

Mastercard Visa AMEX Discover CC# _____ Exp. ____/____/____ Signature _____

In consideration of my entry of my child's entry being accepted for participation in the STOP CHILD ABUSE ~ BLUE RIBBON RUN/WALK, hosted by ST. PETERSBURG EXCHANGE CLUB FOUNDATION. I agree to assume the risks incidental to such participation and use for my self, my heirs, executors and administrators, waive and release any and all rights and claims for damage I may have as a result of participation in this athletic contest. I release the sponsors, Suncoast Center, Inc., volunteers and hosts, ST. PETERSBURG EXCHANGE CLUB and any officials associated with STOP CHILD ABUSE ~ BLUE RIBBON RUN/WALK. I understand this release agreement includes any claims based on negligence, action or inaction of any of the above released parties and covers bodily injury and property damage, whether suffered by the registered child before, during or after such participation. I declare the registered individual is physically fit to the point and skill level required to participate in this event. I further authorize medical treatment for registrant at my cost, if the need arises. I certify I am 18 years or older.

Signature **X** _____ (Signature of parent or guardian if under 18 years of age)

INCLUDE : Entry Fee (All Checks Payable to St. Petersburg Exchange Club Foundation)
*** Early Registration by March 26th, Guarantees T-Shirt**



Bring to event or mail before to : Kerri Pedersen, Suncoast Center, Inc. ~ 4000 Gateway Centre Blvd, Suite 200 ~ Pinellas Park FL 33782