



Quail Trail 5K

at Historic Pebble Hill Plantation
Hwy 319, Thomasville, GA

Saturday, September 24th, 2011
8:00 am

Registration: Proceeds benefit The Lewis Hall Singletary Oncology Center
\$15 pre-race, postmarked by September 15th
\$20 race day, late registration will begin at 7am

Course: Hilly 5000 meter CROSS COUNTRY course through all areas of Pebble Hill Plantation. Running surfaces include pea gravel, grass, dirt, red-clay and asphalt. Course is USA Track and Field Certified (GA09026WC).

Awards:

Trophies to first male and female in the Open and Master's (40+) division.

Awards to top 3 finishers in the following age groups:

| | | | |
|--------------|-------|-------|-------|
| 19 and under | 20-29 | 30-39 | 40-49 |
| 50-59 | 60-69 | 70+ | |

T Shirt Size (circle one) S M L XL XXL (+\$2) XXXL (+\$3) No Shirt (-\$5)

Name _____ Email _____
First Last

Address: _____
City State Zip Code

Phone: _____ Date of Birth: _____ Age: _____ Sex: _____

Make Checks Payable to: Pebble Hill Plantation Quail Trail 5K
Mail to: Quail Trail 5K, 1708 Don Caster Drive, Thomasville, GA 31792

For and in consideration of my being allowed to participate in the Pebble Hill Quail Trail 5K (hereinafter 'the event') on behalf of myself, my heirs, personal representatives and assigns, I hereby assume all risks and waive all claims for illness or injury which may result, directly or indirectly, from my participation in the event and agree to indemnify and hold harmless Pebble Hill Plantation, sponsors, organizers and their respective employees, elected officials, appointed officials and any other person or entity associated with the event of and from all actions and claims, including attorney's fees, which may at any time be incurred by reason of my participation in the event. I understand that anyone entering this race who is not adequately trained is taking a definite risk in suffering physical ailments. I do hereby state that I have trained properly and that I am physically prepared to participate in the event, and I expressly assume the risk of any illness or injury which may result from my participation in the event.

I authorize the use of any photograph, moving picture or any other graphic depiction made immediately before, during or after the participation in the event by the organizers or others, and I expressly waive any claim or privilege or privacy, or right to compensation for the publication of any such photograph, film or other depiction.

Signature of Entrant or Parent or Legal Guardian if under 18

Date