A Peninsula Track Club Grand Prix Event!
5th Annual

BOYS & GIRLS CLUBS OF THE VIRGINIA PENINSULA FOUNDATION

Boys & Girls Clubs Smart Smiles® 5K

peninsulatrackclub

RRCA

Saturday August 18, 2012 Mariners' Museum Park

What time is it? 7:00 am Race Day Registration & Packet Pick-Up
8:00 am 5K Walk/Run
9:30 am Awards, Door Prizes, & Celebration

Pre-registered? Early pick-up: Friday, Aug. 17 from 1-5 pm @ BGCVP Admin Office
11825 Rock Landing Dr., Chesapeake Bldg., Ste B
Newport News, VA 23606 757-223-7204

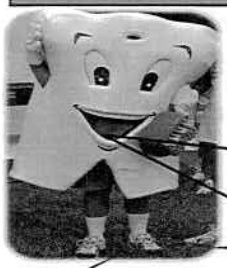
Where do I go? Mariners' Museum Park- enter across from Warwick H.S. (off of Warwick Blvd.)
Parking at Warwick H.S.

How much is it? $20 Before Race Day $25 Race Day
$10 per person for high school athletes
Fundraising teams *(see info box below & contact lmacduffie@bagclub.com)*

PTC Passes Accepted!

What do I get? A fun time, t-shirt & race bag with free coupons and goodies! Awards go to top 3 overall male & female in age groups: U 11, U14, U19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70+
(T-shirt availability & size not guaranteed unless pre-registered)

FINISH LINE RESULTS & RACE SUPPORT PROVIDED BY THE PENINSULA TRACK CLUB!
www.peninsulatrackclub.com



Register by mail, in person or online at www.bagclub.com
Click on Smart Smiles 5K on the left hand side or go to the Upcoming Events tab & click on Smart Smiles 5K.More info: lmacduffie@bagclub.com

FUNDRAISING TEAM INFORMATION

Free race registration for up to 10 members from each fundraising team that raises $1,000+ for Boys & Girls Clubs Smart Smiles 5K. The team that raises the most money will receive recognition and a prize on race day!

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ Age on Race Day: _____ Gender: M F
(circle one)

T-Shirt Size (circle) Youth: S M Adult: S M L XL School Name: _____
(for High School Athletes only)

Team Name: _____
(for team registration only)

Total Registration Fee: $_____ **I would like to make a tax deductible donation of: $_____**

Check/cash is enclosed ☐

Total Amount Enclosed: $_____ **Charge: ☐ Visa ☐ MasterCard ☐ Discover**

_____ _____
Card Number **Expiration Date**

Please read the reverse side of this form and sign below: I HAVE READ THE ACKNOWLEDGEMENT AND ASSUMPTON OF RISK, WAIVER, OF LIABILITY IN ITS ENTIRETY ON THE BACK OF THIS PAGE AND I FREELY VOLUNTEER EXECUTE THE SAME. I UNDERSTAND THAT I MAY BE WAIVING CERTAIN LEGAL RIGHTS BY EXECUTING THIS DOCUMENT AND I GRANT FULL PERMISSION TO BOYS & GIRLS CLUBS OF THE VIRGINIA PENINSULA FOUNDATION AND ITS AGENTS AUTHORIZED BY THEM TO USE MY PHOTOGRAPHS, VIDEOTAPES, MOTION PICTURES, RECORDING, OR ANY OTHER RECORD OF THIS EVENT FOR ANY PURPOSE.

Signature: _____ Date: _____

Signature of parent or guardian if under 18: _____

Please make checks payable to Boys & Girls Clubs of the VA Peninsula Foundation
11825 Rock Landing Drive, Chesapeake Building, Suite B, Newport News, VA

DELTA DENTAL'S Smart Smiles At the Dentist