



TACTICAL 10K & 2MILE SATURDAY, NOVEMBER 16, 2019 7AM START

The race will start at South Beach Park located at 1704 Ocean Drive Vero Beach, FL 32963. All proceeds will be used to purchase equipment for members of the Vero Beach Police Department & Critical Response Team.

REGISTRATION: Registration can be completed by using this form. Mail-in registration must be postmarked by November 2, 2019. Make checks payable to Vero Beach Police Foundation and mail to 1055 20th Street Vero Beach FL, 32960 Attn: Lt. Huddy. Registration will also be accepted in person at Runners Depot located in Miracle Mile Plaza at 436 21st Street Vero Beach FL, 32960 or through the event website <https://tactical10k.simplerace.com>

RACE PERKS & AWARDS: The first 100 paid registered athletes will be guaranteed a *Dr-Fit Race Shirt* and *Sport Towel*. Awards for the 10K will be given to the overall male and female winners and top three finishers in each of the 5 year age groups starting with (14 and under and ending with 70+). Awards for the 2Mile will be given to the overall male and female winners and top three finishers in each of the 10 year age groups starting with (14 and under and ending with 70+).

RAFFLE: Numerous items will be raffled off after awards are presented. Tickets will be sold the day of the event (\$1.00 per ticket or 6 for \$5.00) or can be purchased in advance by calling 772-978-4679.

PACKET PICK UP: Packets can be picked up at Runners Depot on 11/14/19 & 11/15/19 from 10:00am -5:00pm or at the event on race morning.

___ 10 K	\$20.00 before 9/16/19	\$30.00 9/17/19-10/16/19	\$33.00 prior to race day	\$35.00 race day
___ 2MILE	\$15.00 before 9/16/19	\$25.00 9/17/19-10/16/19	\$28.00 prior to race day	\$30.00 race day

___ **KIDS DASH:** No fee. All kids will receive a replica toy badge.

___ **DONATION:** I will not be running in the event but would like to make a donation!

Information:

Last Name: _____ First Name: _____ Age on 11/16/19: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Gender: M F Date of Birth _____/_____/_____ Email: _____

Home/Cell Phone Number _____ Emergency Contact Name /Number: _____

Waiver – Required

INCOMPLETE OR UNSIGNED ENTRY/RELEASE FORMS WILL NOT BE ACCEPTED. In consideration of the acceptance of my entry, I, for myself, my heirs, for whom I am guardian of, executors and administrators, do hereby discharge and release the Vero Beach Police Foundation, the Vero Beach Police Department, the City of Vero Beach, Indian River County and all cooperating businesses, officials, sponsors, producers, volunteers, supporters, organizations, assigns and/or their representatives of all claims, damages, actions, liabilities, costs and/or expenses whatsoever, which I may have against them in any way connected with my participation in this event, including travel to or from this event and including injuries which may be suffered by me before, during or after the event. I authorize the officials of the race to use their discretion to have me or my child transported to a medical facility and I take full financial and legal responsibility for this action. I verify that I am physically fit enough to complete this event and that I am medically cleared to participate by my physician. I permit the use of my name, photograph and/or recording to be used in connection with this event for any lawful purpose. NO REFUNDS WILL BE GIVEN. BY SINGING THIS RELEASE, I HAVE READ THE ABOVE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK. Signature: _____ Date: _____ Parent

Signature (if under 18): _____ Date: _____