



UVI/Queen Mary Highway
 14th Annual UVI 5K
 Walk/Run
REGISTRATION FORM
 Friday, March 13, 2015 @ 6:00 am



EVENT INFORMATION	THERE ARE 2 WAYS IN WHICH YOU CAN REGISTER FOR THE 5K WALK/RUN
<p>The 5K Walk/Run will take place from the Sunshine Mall to UVI Albert A. Sheen St. Croix Campus. Registration is 10.00. Pre-registration for this event begins on March 6, 2015 and ends on March 12, 2015. Registration the day of the race begins promptly at 5:15 am and ends at 5:45 am. The first 100 registered participants are guaranteed a commemorative t-shirt.</p> <p>Breakfast will be provided at the end of the event!</p> <p>Prizes will be awarded to the first and second overall male and female walkers/runners; and the first male and female UVI alumni, UVI student, UVI staff and UVI faculty walker/runner.</p> <p>Parking is available at Sunshine Mall. Please note that transportation will be provided from UVI to Sunshine Mall AFTER the race.</p> <p>Questions? Email us at michelle.tuittelliott@uvi.edu or call 340-692-4199</p>	<ol style="list-style-type: none"> Drop off this registration form to: Michelle Elliott Campus Operations Office UVI/Albert A. Sheen St. Croix Campus <p>CASH OR CHECK payable to the University of the Virgin Islands must be accompanied with the completed form.</p> <ol style="list-style-type: none"> Register online @ www.virginislandspace.org This form can also be located on the www.uvi.edu and www.virginislandspace.org

WAIVER – RELEASE – STATEMENT OF FITNESS:

I take full responsibility for my participation in this event, which is conducted in high heat and humidity. I understand that this event will take place on public streets used by automobiles and other vehicles, with limited traffic control. I further release UVI, the VI Pace Runners, all sponsors, organizers, and volunteers from all claims resulting from loss, injury or illness from my participation in this event, and give permission to use my name and/or picture, videotape motion pictures, recordings and other record of this event for legitimate purposes.

ALL PARTS OF THIS FORM MUST BE COMPLETED TO BE PROPERLY REGISTERED FOR THE EVENT. Any incomplete forms will not qualify you as a participant in this event.

Print Name : _____ Email address: _____
 Last Name First Name

Mailing Address: _____

Age Group: Under 20 20-29 30-39 40-49 50-59 60+ T-Shirt Size: _____

Gender: Male Female Phone # (home): _____ Cell: _____

Name of Organization or employer: _____

UVI Alumni UVI Student UVI Staff UVI Faculty Community Member

Signature: _____ Date: _____

Signature of parent/guardian (if under the age of 18): _____ Date: _____

RACE NUMBER: _____

