

2nd Annual 5k and Kids Obstacle Run



... March 12th ...
SPRING
INTO EDUCATION

8:00am Kids Obstacle Run (5-8yr)

8:30am 5k Awtrey Middle School

9:00am Luau Themed After Party

Benefiting The Kennesaw Big Shanty Foundation
and The Awtrey Middle School Foundation



Race Day



Race shirts— Super-soft and unisex t-shirt included in pre-registration {perfect t-shirt to celebrate your race}

Fast and well-marked course with hills and trail running

Pint Sized Run for kids 5 to 8 with a supervised Kids Corral on the Football Field for kids to play while their family runs the 5k!

Finish on the NCHS Football Field

Race day Parking: North Cobb High

Food, refreshments after the race

Online registration ends 3-9-16

Spaghetti Supper!

New this year: COME JOIN US ☺

Spaghetti Supper & Silent Auction

Where: NorthStar Church


When: Friday March 11th 5-8pm

\$5 per person / max \$20 family



What is the purpose of our three school foundations?

The foundations were established to enhance educational opportunities that otherwise may not be part of the schools' program. Each school foundation funds specific school priorities. The foundations work congruently with the administration and PTSA to make our children's schools absolutely the best they can be. The Foundation works congruently with the Administration and PTA to make our children's schools absolutely the best they can be.

Purpose of this special race for our community: Funds raised from the  race will be reinvested back into each of the three schools to support local school priorities.

REGISTRATION: Pre-registration: \$20 {includes super-soft unisex T-shirt & goody bag} In-store registration at Big Peach Running Company (Kennesaw) OR Active.com

-Scan the QR code to go directly to the Active.com link

Drop off at KES, BSIS or Awtrey Front Desk.

Make Checks Payable to: The Awtrey Middle School Foundation

Mail to: Awtrey Middle School Foundation 3601 Nowlin Rd Kennesaw, GA 30144 or {Mailed-in registrations must be postmarked by 3/5/16}



PACKET PICK UP / TSHIRT PICK UP
Spaghetti Supper and Silent Auction
Friday March 11, 5-8pm @ NorthStar Church

RACE DAY REGISTRATION – 7-8am
North Cobb High School: \$30
no guarantee of a t-shirt.

First Name _____ Last Name _____ Age (race day) _____
Address _____ City _____ St _____ Zip _____
Phone _____ Male Female Circle T-shirt size: YS YM YL S M L XL XXL

5K (\$20) (\$15 for Students) Kids Obstacle Run (5years to 8 years) (\$15) I just want the shirt (\$20)

Race Day Registration All events (\$30)

Email address (for last minute details, parking info) _____

Homeroom Teacher: _____ School: KES BSIS AWTREY

Waiver and release of liability: I affirm that I am physically fit for this race and I assume all risks associated with my participation in this event, including, but not limited to, the effects of weather, traffic, course conditions and course surfaces, falls, and contacts with other runners, spectators or volunteers. In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors, and assigns, all claims of any nature arising from my participation in the Sprint into Education Kennesaw Elementary/Big Shanty Intermediate/Awtrey Middle School Foundation, and do hereby release the race committee, all sponsors, workers, officials, volunteers, Orion Racing and the City of Acworth from any claim whatsoever arising from my participation in the event. I agree to abide by the rules for participation and acknowledge that the race committee may return my entry at its discretion. I understand the risks for this race and have trained adequately to prepare for this event. I consent to the use of photographs of me in the event for any legitimate purpose, including publicity. I realize that there is no refund and, in the event of inclement weather, my entry fee will be a donation to the charities associated with this race. For safety considerations, please no roller blades.

Signature _____ Date _____

Parent's signature (if entrant under 18) _____

In case of emergency – Contact _____ Phone _____

Medical conditions: _____

BIB #

BPRC Payment: