

The Calvert Alliance Against Substance Abuse presents



15th Annual “Step-by-Step” 5K Fun Run/Walk



This run is in memory of Mike Blackwell. Mr. Blackwell was a runner killed while jogging on Broomes Island Road. All proceeds to benefit CAASA Programs.

Date: November 7, 2015

Time: 9:00 a.m.

Early Registration and Check in: 8:00 a.m.

The 3.1-mile (MD 12024JS) begins and ends at the Calvert Marine Museum covering scenic Solomons on hard roads and through residential areas. No Dogs or Pets. Strollers allowed. Prizes will be awarded to male and female runner & walkers in all categories: 10 and under, 11-13, 14-16, 17-19, 20-29, 30-39, 40-49, 50-59, 60-69 and 70 and over; Best Overall Walker; Oldest Participant; and Youngest Participant. Free t-shirts provided to the first 125 paid participants. Come early for a Zumba warm-up. Refreshments provided to all participants. Door Prizes too! Online Registration is powered by **RaceIt.com** at <https://www.raceit.com/register/?event=34226>. **For more information, call: 410-535-3733. Relay for Hearing Impaired: 800-735-2258.**

ENTRY APPLICATION

The undersigned, _____, hereby waives any right that he or she may have to file a claim for damages, or initiate proceedings in any court, for the purpose of asserting a claim for damages, resulting from any injury that he or she may sustain while participating in the CAASA 5K Fun Run/Walk. The undersigned also agrees to save and hold harmless the Board of County Commissioners of Calvert County, Maryland, (“Board of County Commissioners”), its officers and employees. This waiver extends to any injuries or damage caused by conditions found on the premises, the actions of any individual who is not a county employee, acts of God, or any other cause beyond the control of the Board of County Commissioners of Calvert County, Maryland, and its employees.

Further, the undersigned gives the Board of County Commissioners permission to use his or her name, photos, and/or family pictures taken at the CAASA 5K Fun Run/Walk for publicity purposes.

Signature (parent or guardian if under 18 years of age) _____ Date _____

Last Name: _____ First: _____ MI: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Day): _____ Phone (eve): _____

Email: _____

Sex: M F Birth (MM-DD-YYYY): _____ Age Race Day: _____

****All information must be completed on this form – Signature required****

Check participation type:

_____ 5K Runner
_____ 5K Walker

Payment Checklist:

Mail and make payable to:

**CAASA
P.O. Box 2104
Prince Frederick, MD
20678**

Circle fee category:

**\$25.00 Registration
\$30.00 Day of Race
\$15.00 Student (under 21)
\$20.00 CBRC Member –
(in advance only)
\$20.00 CAASA Member –
(in advance only)**

Amount Enclosed:

\$ _____

Shirt Size Request (circle):

**S M L XL XXL
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