ONE FORM PER RUNNER PLEASE

40th Annual Super Dolphin Day Race

Saturday, February 24, 2018
Casino Neptune Park
St. Simons Island, GA

Join us at the Pasta Party on 2/23/2018, 5:00pm- 8:00pm @ the Casino Neptune Park

10K Starts @ 7:00am, 5K starts @ 8:30am, 1 Mile Fun Run @ 9:30am

More information and registration online at **SuperDolphinDay.com** or **Active.com**

-- ONLY ONE RACE ENTRY PER FORM, PLEASE --

Individual Runners

☐ 5K Run ☐ 10K Run

☐ 1 Mile Fun Run

$30 per Adult
$35 after 2/15/18

Two Race Combo

☐ 5K Run ☐ 10K Run

☐ 1 Mile Fun Run

Run ALL Races!
$45 per Runner
$50 after 2/15/18

$12 per event for all runners under 18 years

Registration closes 1 hour prior to each race event.

Medals will be awarded to the top overall male & female finishers in the 1 Mile Fun Run. Medals will be awarded to the top three finishers in each age division for the 5k & 10k races.

Make checks payable to ***Super Dolphin Day Race***. No Cash please; Sorry, No Refunds

Form and check can be mailed to: St Simons Elementary, ATTN: Super Dolphin Day Race, 805 Ocean Blvd, St Simons Island, GA 31522

FIRST NAME | M.I. | LAST NAME

M / F | DATE OF BIRTH | AGE ON RACE DAY | EMAIL ADDRESS | DAY PHONE NUMBER

MAILING ADDRESS

CITY | STATE | COUNTRY | ZIP CODE

St Simons Elementary and Oglethorpe Point Elementary Students only: TEACHERS NAME

T-Shirt size (Circle One): YOUTH: S M L ADULT: S M L XL XXL XXXL

T-shirts are not guaranteed to runners who register after 2/10/2018.

In consideration of accepting this entry, I the undersigned, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against St. Simons Elementary School & Oglethorpe Point Elementary School, their respective PTAs, race officials, volunteers, and any and all sponsors and their respective successors, and assigns for any and all injuries suffered by me in this event. I attest and verify that I will participate as a foot race entrant, that I have sufficiently trained for this event and my physical condition has been verified by a licensed medical doctor. Further, I here by grant full permission to any and all the foregoing to use photos, videos, and any other record of this event for any purpose.

Date _____ Signature of Runner _____ Parent/Guardian *(if runner is under 18 yrs)* _____