

ONE FORM PER RUNNER PLEASE

42ND ANNUAL SUPER DOLPHIN DAY RACE



SATURDAY, FEBRUARY 22, 2020

THE CASINO AT NEPTUNE PARK

ST. SIMONS ISLAND, GA 31522 | SUPERDOLPHINDAY@GMAIL.COM

10K STARTS @ 7:00AM | 5K STARTS @ 8:30AM | 1 MILE FUN RUN @ 9:30AM

FILL OUT THE FORM BELOW TO REGISTER BY MAIL OR GO TO SUPERDOLPHINDAY.COM OR ACTIVE.COM TO REGISTER ONLINE.

ONE RACE (select one) AMOUNT
10K 5K 1 MILE FUN RUN (\$30 per adult | \$35 after 2/15/20 | \$12 per child under 18)

TWO OR THREE RACES (select two or more races)
10K 5K 1 MILE FUN RUN (\$45 per adult | \$50 after 2/15/20 | \$12 per child under 18)

T-SHIRTS (ONE FREE t-shirt per runner. T-shirts are not guaranteed to runners who register after 2/10/2020.)
YOUTH: S M L | ADULT: S M L XL XXL XXXL \$0

ADDITIONAL T-SHIRTS (Additional t-shirts are for sale at \$12 per t-shirt. Put the number of t-shirts next to the sizes below.)
YOUTH: S M L | ADULT: S M L XL XXL XXXL

DONATE TO THE SUPER DOLPHIN DAY RACE
You don't have to race to help our SSE and OPES students. Include a donation along with your registration.

TOTAL AMOUNT

Make checks payable to SSE PTA and please reference "Super Dolphin Day Race". No cash please. Sorry, no refunds. Form(s) 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 ZIP CODE COUNTRY SSE and OPES students only: TEACHER'S NAME

REGISTRATION CLOSING 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.

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 of 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)