

# 10K BEAR CRAWL

&

# 1 Mile Fun Run/Walk

**RACE EVENT: Saturday—May 5, 2007**

**Time:**

6:30—7:30am

8:00am

8:15 am

**Registration at Site**

**10K Run/Walk**

**1 Mile Fun Run/Walk**

**Entry fees:**

•Early Registration—\$30.00 (DA Students—\$15.00)

•Day of Race—\$35.00 (DA Students—\$15.00)

**Family Cost Cap of \$75.00**

**Pre-Register by: Friday—April 20th**

**Packet Pick-up:**

Wednesday- May 2nd (8am—6pm) at DA Lower School

Friday—May 4th (8am—7pm) at Race Site



## PRIZES

1st Place Overall—\$50 Gift Card  
2nd Place Overall—\$40 Gift Card  
3rd Place Overall—\$30 Gift Card

**Other Prizes By Age/Sex:**

- 14 and under
- 15—18
- 19- 24
- 25—29
- 30—34
- 35—39
- 40—44
- 45—49
- 50—54
- 55 and up

**Sponsored by:**

Davidson Academy Association  
All-Star Screen Printing  
Acme Multisports  
Cindy Stone Graphic Design  
Over The Top  
Purity - Home Delivery  
The Mortgage Group  
Schumacher Planning & Design  
Leslie Hudson  
UHAUL of Hendersonville

**For more information contact:**

Julie Whittington at [tnwhitt4@bellsouth.net](mailto:tnwhitt4@bellsouth.net) or 615-519-0720

Complete form & return w/check made payable to: Davidson Academy Association, 1414 Old Hickory Blvd., Nashville, TN 37207  
These fees are non-refundable. You can also register at [www.active.com](http://www.active.com)

PLEASE CHOOSE ONLY ONE:  
(circle one)

T-SHIRT:  
S M L XL XXL

OR

SINGLET:  
S M L XL XXL

10K  1 Mile Fun Run/Walk

DA Parent / Student / Teacher / Faculty

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Sex \_\_\_\_\_ Age on race day \_\_\_\_\_

Email Address \_\_\_\_\_

**Participation Release: (Signature required for participation)**

In consideration of your acceptance of my entry into this race, I release & discharge Davidson Academy and all sponsoring businesses and organizations from all claims of damages, demands, actions and causes of actions whatsoever, in any manner arising or growing out of my participation in this event. I also hereby consent to permit emergency treatment in the event of injury or illness.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent or guardian if under 18 \_\_\_\_\_ Date \_\_\_\_\_