



# **RUN FOR A DREAM 5K & 1M FUN RUN**

Saturday, December 5, 2020 1 Mile Fun Run at 9:00am 5K Run/Walk at 9:30am

**Bleckley County Elementary School** 470 Georgia Highway 26 East Cochran, Georgia 31014

## **Proceeds**

Landon Padgett Memorial Scholarships awarded annually to Bleckley County High School seniors and the Landon Padgett Patient Family Assistance Program providing financial assistance to low-income families of kids with acquired and congenital heart defects at the Sibley Heart Center Cardiology at Children's Healthcare of Atlanta where Landon was a nurse.

### Registration

\$25 advance registration for each event if postmarked by Sunday, March 15th. T-shirts available the day of the event. \$30 November 23rd - December 5th. T-shirts mailed after the event. Run t-shirt, bib and refreshments included.

#### **5K Awards**

Trophies will be awarded to the overall male and female winners. Medals will be awarded to top three M/F in each of the following age groups: 10 & under, 11-14, 15-19, 20-24, 25-29, 30-39, 40-49, 50-59, 60 & over.

#### 1M Awards

Medals will be awarded to top three M/F in each of the following age groups: 6 & under, 7-9, 10-12, 13 & over.

## Contact

(Parent or guardian signature required if under 18)

For additional information, please contact: Tony Shiver (Race Director) at 404-431-3901 or tony@landonpadgett.org

PLEASE PRINT ALL INFORMA	ATION - ONE ENTRY PER FORM
Registration for: 5K 1M Fun Run T-shirt Only (\$25	5)
T-shirt Size: Youth: S M L Adult: S M L XL XXL	ioi each sinit.
Name:	
Phone Number:	
	Make checks payable to:
Address:	Landon Padgett Memoriai Fund
City:	-
State:	Mail to:
7in:	Run for a Dream
Zip:	
Email:	346 Woodland Trail Road
Gender: Male Female	Cochran, Georgia 31014
Date of Birth:	Postmark by November 14th to receive your shirt at the
	event. Registrations postmarked after that date may
Age on Race Day:	result in your shirt being mailed to you after the event.
Waiver of Liability: I hereby release the hosts, sponsors, volunteers and officials claims of injury or illness, which may result directly or indirectly from my participal event. I also give permission for my name and photograph to be used in any med	