

ATLANTA HBCU ALUMNI ALLIANCE 5K RUN/WALK



LOVE THE RUN!



**SATURDAY
JUNE 25, 2022
PIEDMONT PARK
ATLANTA GA
8AM EDT**



JOIN THE FUN!



course certified by
USA TRACK & FIELD

ONLINE REGISTRATION: www.HBCUalumniAtlanta.org

REGISTRATION FEES

FEB 14TH - 28TH	\$25	-----
MAR 1ST - 29TH	\$30	MAR 30TH - \$35
APR 1ST - 15TH	\$40	APR 30TH - \$45
MAY 1ST - 15TH	\$50	MAY 30TH - \$55
JUN 1ST - 15TH	\$60	JUN 30TH - \$65
JUN 30TH - \$65	INPERSON RACE DAY - -	\$65

KIDS RUN/WALK (12 and under)

FEB 14TH - 28TH	\$10
MAR 1ST - 29TH	\$15
MAR 30TH	----- \$20
JUN 30TH	----- \$25
INPERSON RACE DAY	- \$25

Following the race all winning participants must be present at the awards ceremony. Stick around for scholarship giveaways, raffles and prizes! Visit our Health Fair for free health screenings! And join Alumni Row for fun and fellowship!

FIRST NAME _____ LAST _____ GENDER _____ M _____ F

_____ WALK OR _____ RUN T-SHIRT SIZE _____ S _____ M _____ L _____ XL _____ 2XL _____ 3XL

ADDRESS _____

CITY _____ STATE _____ ZIP _____

eMAIL ADDRESS _____ PHONE () _____

COLLEGE / UNIVERSITY _____

TEAM NAME _____

REGISTRATION FEE \$ _____ PROMO CODE _____

* _____ YES, I want to save time! Mail my Race Packet for \$10 _____ YES, I want to add an additional donation of \$ _____ **TOTAL PAID \$ _____**

NOTE: Separate entry form and signed waiver must be completed for each Registrant.

WAIVER: I know that running and participating in training run programs are potentially hazardous activities. I should not run unless I am medically able, with consent from my physician, to properly prepare and participate in the 15th Annual Atlanta HBCU Alumni Alliance 2022 5K Run/Walk Road Race (hereinafter called "Road Race"). I assume all risk associated with running in the "Road Race" and in preparation for the "Road Race", including but not limited to falls, contact with other participants, the effect of the weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, and knowing these facts, and in consideration of your accepting my entry to the "Road Race", I, for myself and anyone entitled to act on my behalf, waive and release the Atlanta HBCU Alumni Alliance, (AHBCUAA), all city, county, and state governments, and all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this road race/training program. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that all entries are final with no refunds. The official race director reserves the right in any event of emergency or local or national disaster to cancel the race or to change the day and or time to a later day and that in the event of cancellation or change there is no refund of entry fees. I agree to the above waivers and disclaimers.

Participant _____ Birthday _____ / _____ / _____

Parent of Participant under the age of 18 _____

Make check payable to **Atlanta HBCU Alumni Alliance** and mail to: **Atlanta HBCU Alumni Alliance P.O. Box 880 Atlanta, GA 30301-0880**