



**THE 2nd ANNUAL VIKING XC CHALLENGE 5K RUN
AND 1 MILE FUN RUN/WALK**

DATE: November 12, 2016 **TIME:** 8:00 AM (5K) 9:00 AM (Mile)

LOCATION: Northeast High School

This is a fundraiser to support the Cross Country team at Northeast High School. Proceeds of the race will benefit the team and provide them with funds to take care of expenses that are self-funded such as transportation, race entry fees, team shirts, and team awards. The race course will be all Cross Country and will start in the grass field between Northeast High and Sexton Elementary (next to the baseball fields).

I will participate in the race/walk as a:

- ___ Runner \$25* (includes t-shirt)
- ___ Northeast/Meadowlawn/Sexton Students \$15* (includes t-shirt)
- ___ Mile Fun Run/Walk \$15* (includes t-shirt)
- ___ Donor/Ghost Runner \$ _____

PLEASE MAKE ALL CHECKS PAYABLE TO: **NORTHEAST HIGH BOOSTERS**

***(DAY OF RACE REGISTRATION - NO T-SHIRTS WILL BE AVAILABLE)**

Race Entries:

Mail to: Northeast High School (Attn: Bookkeeper)
5500 16th Street N, St. Petersburg, FL 33703 (POSTMARK BY 11/1)

Race day: Registration on race day will take place at the **field behind Sexton Elementary** beginning at 6:45 am.

T-shirt Size

Mens: __ XL __ L __ M __ S
Womens: __ L __ M __ S __ XS
Youth: __ L __ M __ S

First Name: _____ **Last Name:** _____

Address: _____

Phone: _____ **Email:** _____

Race Day Age: _____

I was referred by a NE High Runner: _____ (name)

Waiver/Release: I waive any & all claims for me and my heirs against the officials, sponsors, hosts, or any persons in conjunction with the Viking Challenge 5K Run/Walk. I understand that running/walking a race can be hazardous. I am in proper physical condition to participate in this event. I also give my permission for the use of my name and picture in any media or other account of this event.

Participant Signature

Date

Signature of Parent/Guardian if under 18