

5th annual
event

Donald Bowman Scholarship Night 5k Run/Walk August 11th, 2018

Bring a
Flash light!!!

Donald Bowman passed away from cancer in 2010. The family has chosen to honor his memory by providing students with educational opportunities. All proceeds from this 5k will benefit the Donald Bowman Scholarship Fund.

Registration- 7:30 PM

Race- 9:00 PM

Location- Vineyard Golf Course
16022 Indiana 250
Rising Sun IN 47040

Awards

Runner: Overall Male & Female
Top 2 Male & Female in each age group
Walkers: Top 2 Male & Female in each age group
Age Groups: 14 & Under, 15-19, 20-24, 25-29
30-39, 40-49, 50-59, 60-69, 70 and older
Drawings for over great prizes
Team Awards: Fastest and largest team

Entry Fee-**Students**-\$10, **Adults**-\$20 before August 3th, \$25 day of race

Pre-Registration guarantees a T-shirt & Bag

Online Registration-www.StuartRoadRacing.com

Mail form & fee-
7814 E County Rd 1200N
Sunman In 47041

Checks payable-
Donald Bowman Scholarship Fund

Question/Comments
Danika Brindley-812-584-8454
dbrindley@student.hondros.edu

Please join us following the race for snacks, refreshments, awards, and prizes

Name _____

Address _____

Phone _____

E-Mail _____

T-Shirt size: Circle one

YS YM YL

S M L XL 2XL

Sex _____ Age on Race Day _____

Circle one: Run or Walk

Team: _____

As a participant in Donald Bowman Scholarship 5k, I, for myself, my executor, administrators, heirs, devisees and assigns do hereby discharge the Donald Bowman Scholarship 5k and the Vineyard Golf Course, their management, their officers, board members, employees, members, sponsors, volunteers, organizers or their representatives, or their successors and all cooperating businesses and organizations from all claims of damages, demands, actions, illnesses, death and causes whatsoever in any matter arising from or growing out of my participation or that of my child in the event. I attest and verify that I am, or my child (under 18), is medically able to participate, am physically fit and understand the dangers of running at night and assume all risks of participation in this event. I understand that I may be photographed, filmed or videotaped at the event. I hereby irrevocably grant to Donald Bowman Scholarship Fund, its affiliates, licensees and collaborators the absolute right and permission to use my likeness and/or voice for any purpose whatsoever, including commercial advertising including the use of my name.

Signature _____ Date _____

Signature of Parent _____ Date _____
If under 18