



Development Planning & Engineering, Inc.



ADA MEMORIAL
www.adamemorial.org



site planning
770-271-4676

civil engineering
www.DayDesignGroup.com

landscape architecture
Buford, GA

GAINESVILLE SURGERY CENTER
an affiliate of **SCA**

On July 22nd run your support of the 27th Anniversary of the Americans with Disabilities Act in the 16th Annual ADA 5K, 10K, or 1M in Gainesville, GA.

Proceeds benefit Access to a Better Tomorrow, Inc.'s mission to ensure Georgians with disabilities have equal opportunities to enjoy life, liberty, and the pursuit of happiness.

Registration starts at 7 AM, Race Time at 8:15 AM.

- Pre-registration (Received by July 14) \$ 25.00; Race Day registration \$ 30.00;
- Shady Course, DriFit T-shirts, plenty of fruit, fluids, & fun for all participants;
- Overall & Wheelchair division top three M/F finishers: Under 10, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80 - 84, 85+.

Visit the race website for directions, previous results, and to register online at: www.ADAMemorial.org or email justinp@a-bt.org

Mail Registration form and check to: Access to a Better Tomorrow, Inc.
4689 Price Rd.

Distance: ___1m ___5k ___10k Gainesville, GA 30506

- Pre-registration (by July 14) \$25.00 under 12 \$15: _____
- Corporate Rate (10 or more) & 20.00 ea. _____
- Total Enclosed: _____

Name: _____ Raceday Age: ___ Sex: ___ T-Shirt Size (S-XL): _____

E-mail address: _____ phone: _____

Address: _____

I assume all risks associated with running in this event including, but not limited to falls, contacts with other participants, the effects of weather, traffic, and the conditions of the road, and I waive all claims for myself and my heirs against the City, Sponsors, Organizers, and Volunteers of the ADA Memorial event. All such risks being known and appreciated by me, and having read this waiver and knowing these facts, I certify I am in the proper physical condition, and I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any record of this event for any legitimate purpose.

Participant's signature _____ Date _____

If participant is a Minor a parent/guardian must sign.