



5K Run/Walk & Kids' 400 Meters

Saturday, Feb. 20, 2010

**Location: Downtown San Antonio, TX
(Corner of Buena Vista St & S. Frio St.)**

A community 5K supporting SAMMinistries.

EVENT TIMES

8:00 am – 5K Run/Walk
9:15 am – Kids' 400-Meter Run

AWARDS

Awards presentation will begin at 9:45 am.
**1st overall M/F, 1st master M/F,
Top 3 M/F in the following age groups:**
14 & under, 15-19, 20-29, 30-39, 40-49,
50-59, 60-69, 70 & over

REGISTRATION

Online @ www.active.com
In person @ Roger Soler's Sports, Run Gear Run,
Fleet Feet Sports and Run Wild Sports *

PACKET PICK-UP

Friday, February 19 from 2:00 pm to 7:00 pm @
Run Gear Run - 18720 Stone Oak Parkway #150
San Antonio, TX 78258; Tel; (210) 490-9987

RACE-DAY REGISTRATION

6:15 am to 7:45 am at race site.
* Cash or check only for in person registration



Name _____ Gender M F Date of Birth ____/____/____

Age on Race Day _____ Address _____

City _____ State _____ Zip _____ Phone _____ Email _____

How did you hear about the Street 2 Feet event? _____

- 5K Run/Walk – \$20 until February 18; \$25 thereafter (*Donate a pair of running shoes, take \$5 off*) \$ _____
- Kids' 400-Meter Run (12 & under) – \$10 until February 18; \$15 thereafter \$ _____
- I cannot participate but wish to make a contribution of \$ _____

NO REFUNDS

T-SHIRT SIZE YS YM S M L XL XXL

In consideration of the acceptance of this registration entry, I assume full and complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event; and I hereby release and hold harmless the sponsors, promoters, and all other persons and entities associated with this event from any and all injury or damage, whether it be caused by negligence of the sponsors or promoters or other persons or entities associated with this event or their agents of employees or otherwise. I grant full permission to any and all of the foregoing to use my (and my child's) name, or photographs, videos, and other recordings of participation in this event, without obligation or liability to me (and my child). I have read this agreement carefully, and understand it, and certify my agreement by my signature below.

Signature _____ Date _____
(Parent signature if under 18)

Total Payment \$ _____

Make checks payable to:
SAMMinistries

Mail to:
SAMMinistries
5254 Blanco Road
San Antonio, TX 78216

For more information please send an e-mail to: egrosenblum@gmail.com or log on to www.samm.org