



**APRIL 4, 2020  
Race Entry Form**

Full Name (please print legibly) \_\_\_\_\_

School Name/Organization (if applicable) \_\_\_\_\_

Birthday (ex. 05/25/1990) \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on April 4, 2020

Street Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail Address \_\_\_\_\_

T-shirt Size (circle one): *T-shirts are not guaranteed after March 15, 2020*

Youth:        S        M        L

Adult:        S        M        L        XL        XXL (\$2.00 extra)

**Register online at [www.strictlyrunning.com](http://www.strictlyrunning.com). To register by mail, send checks and registration forms to:  
Healthy Capital 5K, 2515 Devine St. Columbia, SC 29205  
Make checks payable to: Columbia High School/Capital 5K**

*I would like to add a donation of \$ \_\_\_\_\_ to my registration.*

**Liability Waiver:** In consideration and acceptance of this entry, I hereby, for myself, my heirs, executors, administrators, and assignees, release and discharge all sponsors, their representatives and successors and any individual or group associated with this event from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the person names in this waiver. I grant permission for all the foregoing to use photographs, motion pictures, recordings, verbal or written statements, or any other record of this event for any legitimate purpose.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
PARENT'S SIGNATURE (if under 18)

\_\_\_\_\_  
DATE

# **13<sup>TH</sup> ANNUAL HEALTHY CAPITAL 5K**

**Saturday, April 4, 2020**

Columbia High School  
1701 Westchester Drive  
Columbia, SC 29210

**Race Start Time – 8:30 am**

**Packet Pick-up Begins – 7:15 am**

**If you would like to make a donation:**

<http://www.scfutureminds.org/donate/give-to-my-school/?d=sch&ref=Columbia%20High>

All proceeds support CHS Athletics, a Digital Marquee, and Student Incentive Projects

## **COURSE INFO**

5K begins and ends near gymnasium  
Parking area at the back of the school

**USATF Certified - SC08009BS**

Water stop & monitors on the course

## **ENTRY FEES**

**Early Entry Fee—On or before 3/15/2020**

\$15 for Adults/\$10 for Students age 10 & under

**After 3/15/2020**

\$20 for Adults/\$10 for Students 10 & under

**Race Day Entry Fee**

\$25 for Adults/\$10 for Students 10 & under

## **AGE DIVISIONS**

10 & under	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+

## **PRIZES/AWARDS**

Cash Prizes awarded to overall Top Male & Female finishers

Medals awarded to Top 3 Age Division finishers

Awards ceremony immediately following race near finish area.

## **CONTACT INFORMATION**

Paul Calvert, Athletic Director  
Columbia High School  
803-731-8950

[paul.calvert@richlandone.org](mailto:paul.calvert@richlandone.org)