



GEORGIA UROLOGY, P.A.
www.gaurology.com



10K/5K/1M Run/walk Saturday, October 27th 2018

Please join us for The Georgia Urology Fast Pace Race to support prostate cancer awareness and education.

Time: 10K/5K starts at 8:00 AM

Place: Cumming Fair grounds

235 Castleberry Road Cumming, GA 30040

Race Day Registration at 6:30AM.

10k & 5k are USATF certified Peachtree road race qualifiers. Both have over all elevation drops to make for a fast, fun point to point Race. Safe One-Mile Fun Run.

All finishers will receive technical fiber t-shirts.
Women's cut shirts offered for early registrations

Awards for 1st, 2nd & 3rd place in each 5-year age groups for 5k, 10k and 15k. Plus overall & Masters.

SIGN UP: Online: www.active.com (through Oct. 24, 2018)

By Mail: Fast Pace Race

2380 Old Atlanta Rd. Cumming, GA 30041
(Must be post marked by Saturday Oct. 20th.)

Join the FAST Team Challenge for 2018

Early package pick up at _____ on Friday
Oct. 26th Noon-7 pm.

Race day package pick up opens at 6:30 am.

Registration Fees: pre-registration 5K, 10K \$20.00
(through 9-28 afterward \$25.00). Race day cost
\$30.00. 1-mile fun run \$15.00

Our Pasta Dinner with special guest Steve Scott on
Thursday October 25th at 7:00pm. ADD \$10.00
adults and \$8.00 Students. \$5.00 kids 12 and under

Buses available for 1-mile trip to start line boarding
at 7:00am from Fairgrounds. Free Parking is at
Cumming Fairgrounds. Free overnight RV parking in
RV camping lot.

Registration Information and Wavier

First Name: _____ Last Name: _____

Street Address: _____ City/State: _____ Zip: _____

Age: ____ Sex: (circle) **M** **F** Shirt Size: Women's: (S) (M) (L) Men's: (S) (M) (L) (XL) Youth (M) (L)

Race Half ____ 10K ____ 5K ____ 1M ____ Email: _____ ✓ payable to Fast Pace Race

A prostate cancer survivor? Yes ____ No ____ Team Name: _____ Dinner Yes ____ No ____

Waiver: In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against officials, sponsors, club members, volunteers, City of Cumming, Forsyth county, USATF and any others associated with the 2017 fast pace race for illness, accident or injury which may result directly or indirectly from my participation. I assume all risk associated with participation in this event. I further state that I am in proper physical condition to participate in this event. I also give permission for use of my name and photo for any pubic account of this event without compensation. No refunds. Race director reserves the right to limit participation.

Signature: _____ Date: _____ Guardian signature: _____

If participant is under 18 years old