



Turkey 10 Miler, 10K & 5K Run/Walk

River Delta Marina, Creola, AL

Saturday ~ November 19, 2016 ~ 8:30 AM



Benefits: Creola Police and Rescue, River Delta Marina and Drug Education Council.

Food Bank: Please bring canned or packaged non-perishable food to the race for Feeding the Gulf Coast (aka Bay Area Food Bank).

Organized by: Port City Pacers

Get answers. Get help. Get better.

Location: River Delta Marina, Creola, AL. To get to the Marina, take exit 22 off of I-65 (Creola exit) and follow the signs to the Marina at the end of Dead Lake Road (2350 Dead Lake Marina Rd).

Distances: Three certified courses! 10 Mile (AL06034JD), 10K (AL14080JD), and 5K (AL06033JD) are all flat and fast! All are out and back.

Registration: Pre-register by mail entries should be postmarked by November 12, in person at McCoy Outdoor, Run-N-Tri, or Fleet Feet in Mobile or Running Wild in Fairhope until noon on November 17, or online (https://events.com/r/en_US/registration/turkey-ten-miler-10k-and-5k-runs-creola-november-21027) until 4 AM November 18. Early packet pick-up and late registration available at the PCP office at 358 Morgan Avenue on Friday, November 18, from 12 – 5:30 PM. Race day packet pick-up and registration will be available at the race site from 7:00 to 8:15 AM.

Entry fees: PCP Member Pre-Registered: \$17 Day of Race (everyone): \$25
 Non-Member Pre-Registered: \$20
 *PCP members 12 and under: Free, no shirt (\$7 with shirt) **No shirt option** – subtract \$2

Awards: **5K and 10K Awards:** M & F Overall, M & F Masters, Grandmasters, Senior Grandmasters, and Race walkers. Top male and female in 5-year age groups.
10 mile Awards: Top 3 Overall M & F and top M & F Masters, Grandmasters, and Senior Grandmasters. Top 3 Male and Female in 5-year age groups.

Goodie Bags & Shirts: Participants registered by November 7 will be guaranteed shirts and goodie bags on race day. Participants registered after November 7 will receive shirts while the supply lasts.

Post Race Party: Our traditional holiday party will be held. Please bring a dish to share.

Last Name: _____ **First Name:** _____ **Age:** _____ **Sex:** M F **FRN:** _____

Address: _____ **City, State & ZIP:** _____

Phone: _____ **Date of Birth:** _____ **Email:** _____

Event: 5K 10K 10 Mile **Style:** Runner/Walker Race Walker (no running during race)

T-Shirt Size: YL S M L XL XXL No Shirt (minus \$2) **PCP:** Yes No

Estimated time to finish: _____ **Corporate Cup Team Name:** _____

I know that running a road race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature I certify that I am medically able to perform this event, am in good health and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running or walking in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or blades, animals, and radio headsets are not allowed in the race and I will abide by these guidelines. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Port City Pacers, all sponsors, their representatives and successors 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 persons named in this waiver. Results for this race will be posted on the Port City Pacer Website and/or other websites. Please let us know if you do not want your name printed or posted electronically.

Signature of Participant _____ Date _____
 (Parent/Guardian must sign for participants under 18) Sponsored by: _____

Make checks payable to: Port City Pacers

Mail application and fees to: Port City Pacers; Turkey 10; PO Box 6427; Mobile, AL 36660

