



The Third Annual 5K Run for the Gift and Aquathon Saturday, November 6, 2010

Presented By: The Gift of Swimming
Hosted By: SouthWest Aquatics

Date/Time

Saturday, November 6, 2010 Rain or Shine
8:00am 3 Events: Aquathon Race (500 yd Swim & 5K)
500 yd Swim Only
5K Run/Walk (3.1 miles) Only
9:15am Kids' Run

Location

SouthWest Aquatics
205 Windermere Road
Winter Garden, FL 34787
(407) - 905 - 0999
E-Mail: TheGiftofSwimming@yahoo.com

Directions

From 408 take exit 2 (Good Homes Rd) South on Good Homes Rd. Right on Old Winter Garden Rd. Left on Maguire Rd. Right on Tomynd Rd. Right on Warrior Rd. Right on Windermere Rd.

Entry Fee

| | | |
|---------------------------------------|------------------|------|
| ☀ Early Registration: (by 11/6/10) | Aquathon | \$30 |
| | 5K Only | \$25 |
| | 500 yd Swim Only | \$25 |
| ☀ Kids' Run | | FREE |
| ☀ Day of Race Registration | Aquathon | \$35 |
| | 5K Only | \$30 |
| | 500 yd Swim Only | \$30 |

Registration

Registration is available:
☀ On-line at www.AltaVistaSports.com
☀ Fill out Entry Form at SouthWest Aquatics
☀ Mail-In Entry Form to The Gift of Swimming
☀ Call 407-905-0999
☀ Kids' Run register on day of race

Deadline to Register is Nov. 5

Mail-Ins must be post marked by Nov. 1

Kids' Run

Free to all children. Registration for Kids' Run will be on race day at race site. Children will be placed in age appropriate groups. All children will receive a ribbon.

Packet Pick Up

Race packets will be available for pick up at SouthWest Aquatics Friday Nov. 5 from 8am to 7pm or on day of race beginning at 6:45am

Sponsors



Please contact Kathy Baldwin,
Executive Director, for sponsorship
information - 407-905-2815 or
TheGiftofSwimming@yahoo.com

Awards

Awards Ceremony following Kids' Run. Awards will be given to the following Aquathon, 5K and Swim events participants:

- ☀ Top 3 Female & Male in each event
- ☀ Ribbons will be given to all Kids' Run Participants

Amenities

- Computer chip timed
- Results posted at conclusion of the race and on-line soon after
- T-Shirt
- Participant food/beverage
- Post Race Party to include:
 - ☀ BBQ
 - ☀ Petting Zoo
 - ☀ Face Painting
 - ☀ And Much More!

Registration Form

Last Name _____ First Name _____
 Address _____ City _____ State _____ Zip _____ Phone _____
 T-Shirt Size: S M L XL If racing w/ a team: Team Name _____ Birthday ___/___/___ Age _____ Sex: F M
 Event: ___ Aquathon ___ 5K Only ___ 500 yd Swim Only E-Mail _____
 Emergency Contact _____ Phone _____

For Race Info Call 407-905-0999 or E-Mail TheGiftofSwimming@yahoo.com

Make checks payable to:
The Gift of Swimming
Mail to:
205 Windermere Road
Winter Garden, FL 34787
Or Fax: (407)-905-5268

Credit Card (Circle Type) Visa or Mastercard ONLY
 Card Number _____ V-Code (3 digit) _____
 Cardholder Name _____
 Exp Date ___/___/___ Signature _____
 Billing Address _____
 City _____ State _____ Zip _____

In signing below, I acknowledge that participating in this event is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decisions of race officials relative to my ability to safely complete race. I assume all risks associated with participating 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. 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 Alta Vista Sports, the Gift of Swimming, SouthWest Aquatics, the City of Winter Garden and any and 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 on the part of persons named in this waiver.

Signature _____ Date _____
 (Parent if under 18 years)