

City of Largo
SHAMROCK 'N RUN



March 14, 2014 7pm

5k Run • 1.5 Mile Walk • Kids Fun Run



Live Entertainment
from 6-9pm
and Post Race Awards

register online at
active.com

Date/Location

Friday, March 14, 2014. Downtown Largo, FL. The race will begin and end at Ulmer Park (301 West Bay Drive).

Start Times

5k – 7:00pm
 1.5 Mile Walk – 7:15pm
 Clover Kids Fun Run – 8:15pm (ages 7 and under)

Race Fees

5k – \$20 pre-registered, \$25 after March 7th
 1.5 Mile Walk – \$15 pre-registered, \$20 after March 7th
 Clover Kids Fun Run – \$7

Awards

5k only – Top 3 M/F; Masters M/F; Grand Masters M/F; top 3 in each age group.

Age Groups

10 and under; 11–12; 13–14; 15–19; standard 5 year age groups to 70+.

Race Features

T-shirts to the first 400 registered participants. Post-race meal, refreshments, drinks and live entertainment. All Clover Kids will receive a t-shirt, ribbon and kids meal.

Parking

301 4th Street SW - Pinellas County School Board Lot.

Registration

Pre-registration form drop-off at the Highland Rec Complex - (400 Highland Ave NE), 727-518-3016. Pre-registration ends 3/8/2013. Race day registration and number pick-up begins at 5pm. For more information, contact Chip Potts at 727-587-6740 ext. 5016 or email athletics@largo.com.

REGISTRATION FORM – SHAMROCK 'N RUN – MARCH 14, 2014

RP


Last Name _____ First Name _____ Male Female
 _____/_____/_____ Age on Race Day _____
 Birth Date _____ Age on Race Day _____

 Address _____

 City _____ State _____ Zipcode _____

 Phone Number _____ Email Address _____

Mail form and entry fee to:



Shamrock 'N Run
 c/o Chip Potts
 Largo RPA
 PO Box 296
 Largo, FL 33779
make checks payable to: City of Largo

WAIVER: I consider myself adequately trained for the Shamrock 'N Run 5k Run and Walk. I absolve the City of Largo Recreation, Parks and Arts Department, and anyone involved in these races from any liability for injury or illness suffered by me or my dependents in connection with the race. If I or my dependents should suffer an injury or illness as a result of the race, I authorize the officials of the race to use their discretion to have me or my dependents transported to a medical facility and I take full responsibility for this action. I also approve the use of my picture taken before, during or after the race for promotional use.

Signature (Parent/Guardian if under 18) _____ Date _____