

Register TODAY for Take Back the Night Saturday, April 28, 2012

Agnes Scott College
Rain or Shine

Race day registration opens 3:00 p.m.
One mile walk 5:00 p.m.
5K run 5:30 p.m.

REGISTRATION

\$25 in advance (through April 20)

\$30 after April 20 and on race day

Kids, 12 & under, are **\$15** by April 20 and **\$20** after

*Family-friendly event with t-shirts, awards, post-race
pizza party, live music, and moonwalk.*



Take Back the Night

5K Race & 1M Walk to Benefit
DEKALB RAPE CRISIS CENTER
Historic Agnes Scott College • 2012


Many thanks to our Community Partners:

Agnes Scott College, City of Decatur, Decatur Police and CAPS, Decatur Fire, DeKalb County District Attorney's Office, DeKalb County Police, DeKalb Sheriff's Dept., Clarkston Police, Dunwoody Police, Emory Police, Arthur Ratliff Photography, Decatur Digital Photography Club, Phidippides Running Store.



TBTN is part of the Decatur Grand Slam which encourages runners to participate in four of six Decatur races to qualify for a recognition.

Three easy ways to register:

1. In person (save online fees and receive your race number) at any **Phidippides Running Store**
2. Online at 
3. By mail—send form and payment to: DeKalb Rape Crisis Center (checks payable to DRCC), 204 Church Street, Decatur, Georgia 30030



PACKET PICK-UP AVAILABLE 4-8 p.m. on FRIDAY, APRIL 27 AT AGNES SCOTT COLLEGE GYMNASIUM OR ON RACE DAY.

For more information, call 404-377-1429 x 5 or visit www.dekalbrapecrisiscenter.org

PARTICIPANT INFORMATION

Name: _____ Sex (circle one): F M Age on race day: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ (confirmation and race day instructions will be sent by email!)

Phone (home): _____ Phone (work/cell): _____

Event (circle one): 1 mile 5K Adult T-shirt size (circle one): S M L XL

Please note that all youth registering for the 1 Mile receive medals rather than t-shirts for their participation.

I know that participating in a road race is a potentially hazardous activity. I should not enter and participate unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participating in this race, 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 the DeKalb Rape Crisis Center, all city, county, and state governments, Agnes Scott College, all race officials, all sponsors, their representatives and any other groups or individuals associated with this event from all claims, damages or other liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. I also grant permission for the DeKalb Rape Crisis Center to contact me by email for race related communications. I understand that all entries are final with no refunds. The official race director reserves the right in any event of emergency or local or national disaster to cancel the race or to change the day and/or time to a later day and that in the event of cancellation or change there is no refund of entry fees.

If you are registering a child under the age of 18 or an incapacitated adult you represent and warrant that you are the parent or legal guardian of that party and have the legal authority to enter into this agreement on their behalf and by proceeding with this event registration, you agree that the terms of this agreement and waiver shall apply equally to all registered parties. By registering a child under 13, you agree and consent to the collection of that child's information which you provide for the purposes of registration.

Signature: _____
(parent/guardian if under 18 years of age)

Date: _____

Office use only

Race number

I would like to make an additional tax deductible donation in the amount of (circle one): \$5 \$10 \$20 \$50 \$100 \$ _____