

40TH ANNUAL BOWDON FOUNDERS DAY RUN

SPONSORED BY BOWDON MAIN STREET

**SATURDAY, AUGUST 7, 2021
STARTING TIME: 7:30 AM**



**SAME DAY REGISTRATION BEGINS AT 6 AM IN THE LOWER PARKING
AREA OF THE BOWDON MUNICIPAL BUILDING (OLD BOWDON PRIMARY
SCHOOL ON EAST COLLEGE STREET)**

**RACE AWARDS: 1ST OVERALL MALE AND FEMALE, MALE AND FEMALE
MASTER**

**MALE AND FEMALE GRAND MASTER PLUS AGE GROUP AWARDS (SHOWN
BELOW)**

**AGE GROUPS (TOP 3 IN EACH AGE GROUP WILL RECEIVE AWARDS):
10 AND UNDER, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-
54, 55-59, 60-64, 65-69, 70-74, 75 AND OVER**

**COST IS \$25 FOR PRE-REGISTRATION AND \$30 FOR SAME DAY
REGISTRATION
(EARLY REGISTRATION ENDS AUGUST 4)**

**WE ENCOURAGE YOU TO REGISTER EARLY TO AVOID LONG LINES AND
TO RESERVE A T-SHIRT FOR THAT DAY. EACH PARTICIPANT MUST WEAR
A NUMBER ON THE FRONT OF HIS OR HER SHIRT. EARLY AND SAME DAY
REGISTRANTS WILL PICK UP THEIR NUMBERS AT THE REGISTRATION
TENT ON THE MORNING OF THE RACE. TIMING IS CHIP TIMING AND
RESULTS WILL BE EMAILED OUT TO RUNNERS WHO PROVIDE A VALID
EMAIL ADDRESS.**



40TH ANNUAL BOWDON FOUNDERS DAY RUN

TO REGISTER, PLEASE FILL IN THE FOLLOWING INFORMATION AND
RETURN THIS FORM, ALONG WITH PAYMENT TO:

BOWDON MAIN STREET, 136 CITY HALL AVE, BOWDON, GA 30108

DO NOT MAIL CASH

NAME: _____ AGE: _____

GENDER: _____

T-SHIRT SIZE: YOUTH: ___ SMALL ___ LARGE

ADULT: ___ SMALL ___ MED
 ___ LARGE ___ X LARGE ___ XX LARGE

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE:(_____) _____ - _____ EMAIL: _____

**WAIVER (MUST BE SIGNED): IN CONSIDERATION OF ACCEPTANCE
OF THIS ENTRY, I WAIVE ANY AND ALL CLAIMS FOR MYSELF AND
MY HEIRS AGAINST OFFICIALS, SPONSORS, OR HOSTS OF THE
BOWDON FOUNDERS DAY 5K RUN FOR INJURY OR ILLNESS WHICH
MAY DIRECTLY OR INDIRECTLY RESULT FROM MY PARTICIPATION.**

SIGNATURE: _____ DATE: _____

PARENT OR GUARDIAN NAME(IF UNDER 18):

SIGNATURE: _____ DATE: _____