



SEIZE THE DAY • APRIL 28, 2018

BATON ROUGE

LOCATION

LSU OLD FRONT NINE
Nicholson Dr. & Nicholson Dr. Ext.
Baton Rouge, LA 70803

TIME

8:00am: Race Day Registration & Packet Pickup
9:00am: Start of the 1 Mile Fun Run/Walk
9:30am: Start of 5K Run/Walk
9:00-12:00pm: Family Fun Activities/Food/Music/Awards

RACE NUMBERS/T-SHIRTS

Available Thursday, April 26 at Epilepsy Foundation Louisiana's office, 4137 S. Sherwood Forest Blvd. #210, 70816, from 12:00 PM to 6:00 PM and Friday, April 27 from 7:00 AM to 1:00 PM. Also available race day. T-shirts not guaranteed for those who register after April 20th.

PRIZES AND AWARDS:

The team captain of the team that raises the most money will be awarded a grand prize. The team with the most creative t-shirt will win a group prize. Teams that raise more than \$5,000 will be in our 5K Club and given an award. 5K & 1 Mile Fun Run: 1 male/1 female overall winner; 5K: Male/Female winners in age groups three deep, 14 and under and 70 and over. Individuals living with epilepsy will be recognized and given something commemorative.

Complete registration form and mail to EFLA, 4137 S. Sherwood Forest Blvd. Ste. 210 Baton Rouge, LA 70816

Online registration is available at www.epilepsylouisiana.org/events Phone (225) 298-5499 or email cydney@epilepsylouisiana.org for race information or to sponsor/volunteer. Sponsorships still available. Please contact our office for more information.

SEIZE THE DAY

- \$25.00 Registration Fee before April 20
- \$30.00 Registration Fee after April 20 - Race Day
- Donation to the Epilepsy Foundation \$ _____

In honor of (optional): _____

Checks payable to:

EFLA
4137 S. Sherwood
Forest Blvd. Ste 210
Baton Rouge, LA
70816

All entry fees are non-refundable

PLEASE PRINT
LAST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FIRST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

M.I.

--

MAILING ADDRESS - Street and Apartment Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CITY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

STATE

--	--

ZIP

--	--	--	--	--

TELEPHONE NO.

--	--	--	--	--	--	--	--

DATE OF BIRTH

--	--	--	--	--	--	--	--

AGE

--

TEAM NAME (IF APPLICABLE)

T-SHIRT
SIZE

YM	YL	S	M	L	XL	XXL

EMAIL ADDRESS

REGISTRATION

Amount

+

DONATION (optional)

Amount

=

Total

FOR PAYMENT BY
CASH, CHECK OR
CREDIT CARD:

- VISA
- AMEX
- MC
- DISC

ACCOUNT NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EXPIRATION

--	--	--	--

CVV

--	--	--

SIGNATURE OF CARD

I know that running a road race is a potentially hazardous activity. I should not enter and run 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 run. I assume all of the risks associated with running in this event but not limited to fall, contact with other participants, the effects of weather, including high heat, and or humidity, traffic, and other 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 else entitled to act on my behalf waive and release the Epilepsy Foundation Louisiana and all sponsors, their representatives and successors from all claims of any kind arising out of my participation in the event. I grant permission for the foregoing to use any photographs, motion picture recordings or any other record of this event for any legitimate purpose. No refunds will be Issued due to inclement weather.

Signature _____ Date _____

Signature _____ Signature of Parent or Guardian if Registrant is under 18 _____ Date: _____