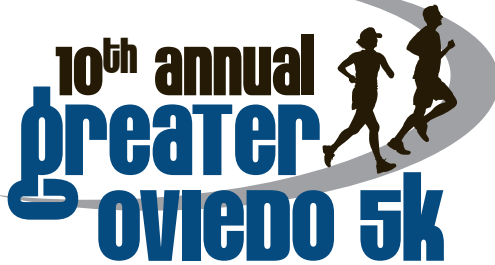


10th ANNUAL GREATER OVIDEO 5K



SATURDAY, MAY 26, 2012 7:30AM

Presented by:
FIRST BAPTIST OVIDEO SPORTS OUTREACH MINISTRY

This is your opportunity to be a part of the 10th Annual Greater Oviedo 5K Run/Walk. This event is designed to be something the whole community can be a part of. We would like you to be a part of this as well.

PARTNERSHIP LEVELS

GOLD - \$300

You may have your logo placed on our Oviedo 5k webpage at fbcoviedo.org/5k as a key race partner. Your organization would have a large logo on the shirt that will be given to all participants. You will be announced on race day. You are entitled to six complimentary race entries/packets. You will receive all the Silver and Bronze Level benefits.

SILVER - \$150

Your organization would have a small logo on the shirt that will be given to all participants and you will be listed in the race-day flyer that will be given out to each participant and those attending the event. You are entitled to two complimentary race entries/packets. You will receive all the Bronze Level benefits.

BRONZE - \$100

Your organization may have a vending table at the event and place promotional items in the race-day packets given to each participant.

Logo must be received by May 7, 2012 to be on the race-day shirt.

Proceeds from the 10th Annual Greater Oviedo 5K Run/Walk will benefit the Michael Callin Memorial Scholarship Fund.

Don't miss out on your opportunity to be part of this community event!
Make checks payable to FBCO and mail to:

First Baptist Oviedo
Sports Outreach
45 W. Broadway St.
Oviedo, FL 32765
☎ 407.365.3484
✉ sports@fbcoviedo.org
🌐 fbcoviedo.org/5k



THANK YOU FOR YOUR CONSIDERED SUPPORT!

Partner/Vendor Signup

Thank You ...

for partnering with First Baptist Oviedo Sports Outreach!
Organization of the 10th Annual Greater Oviedo 5k Run/
Walk requires a number of expenses. This year's race will
benefit the **Michael Callin Memorial Scholarship Fund!**



Please fill out the following form (or use the online form and credit card payment option found at fbcoviedo.org/5k) and provide to Sports Outreach along with your donation. Please make checks payable to: First Baptist Oviedo, 45 W. Broadway, Oviedo FL 32765.

PARTNER DATA

Organization Name: _____

Point of Contact: _____

Address: _____

Phone: _____

Email: _____

Website: _____

Amount of Donation: \$_____ (GOLD = \$300, SILVER = \$150, BRONZE = \$100)

Do you intend to provide a logo before May 7, 2012? _____

Would you like a vending table at the event? _____

Will you be providing any promotional items for the
race-day packet given to each participant? _____



(Details about logos, vending tables and race packets are on the back.)





DETAILS

Race Day = May 26, 2012

Logos:

Large shirt logos for Gold Partners will be a minimum 4 sq. in.
Logo size for webpage will be at the FBCO webmaster's discretion.

Small shirt logos for Silver Partners will be 2-3 sq. in.

Logos must be received by **May 7, 2012** to be included on the shirt.

Vending Tables:

All Partnership levels qualify to have a vending table or location at the event.

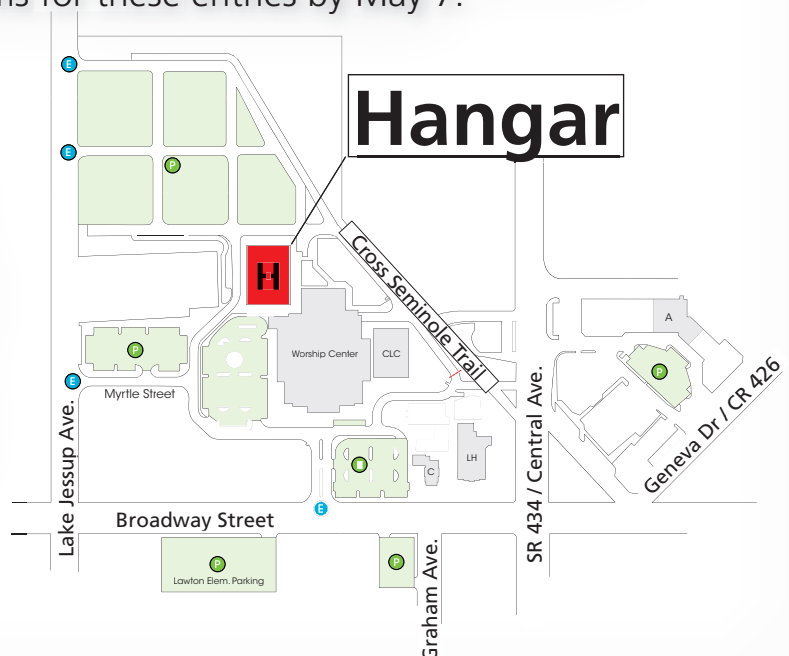
Tables must be reserved on the front of this form. Tables may be set up on Friday, May 25 or before 7:00 race day. Tables will be in the Hangar where Trophy Presentation will take place.

Complimentary Entries:

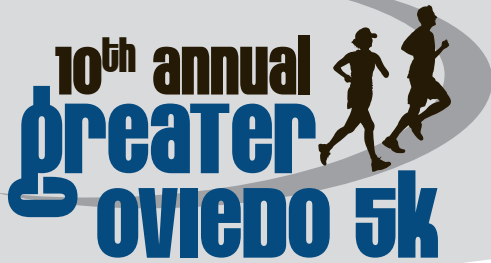
Gold Level partners have the option to receive up to six complimentary race entries, and Silver Level partners up to two complimentary race entries.
Please provide registration forms for these entries by May 7.

Race Pack Insert:

All Partnership levels qualify to place promotional items in the race-day packets given to each participant. All items must be delivered to the Sports Outreach office at 99 Central, Oviedo by **May 16**, ten days before the event.



NAME of GOLD or SILVER LEVEL PARTNER:



run/walk

Saturday, May 26, 7:30 a.m.; kids' run to follow
Tech shirts for first 250 registered!

Entry Fee: (Entry Fees are nonrefundable)
\$15 Before April 1 \$25 April 1-May 22 \$30 May 23-26

KIDS' RUN (AGES 10 AND UNDER)

Any child may participate in the Kids' Run after the 5k race. Distances vary from 100 to 800 yards. Children are divided into age-appropriate groups and distances. Participants receive a medal.

AMENITIES

First 250 registered 5k participants will receive a tech shirt (others a t-shirt). **Military, fire, police or EMT individuals (current or veteran) who register by May 16 will receive an honorary colored tech shirt and register for only \$15, the early registration price.** Be sure to mark your area of service on your registration form. Shirt sizes are not guaranteed after May 16.

AWARDS

A list of trophy categories is available at fbcoviedo.org/5k. Prizes will be given away during the trophy presentation. Some prizes are: iPods, restaurant gift cards, and amusement park certificates. Winners will be chosen amongst those present at the trophy presentation.

BENEFICIARY

All military, fire, police & EMT personnel will be honored at the race. Any proceeds from the Greater Oviedo 5K will benefit the Michael Callin Memorial Scholarship Fund (more information at www.michaelcallin.org/).

RESTRICTIONS

For safety reasons, wheelchairs, baby joggers/strollers, in-line skates, skateboards and dogs are not allowed in the race and headphones are strongly discouraged.

TEAM REGISTRATION

Teams of any size may register to compete for our first-ever Team Trophy or special Local Heroes Team Trophy. Only the top five finish times will count when calculating the winning team. All team runners will register the same as individual runners, but should also include their Team Name and Category. Team members will still be considered for individual trophies.

REGISTRATION

Registration available online at fbcoviedo.org/5k or Walk/run/mail completed form to Race Headquarters: First Baptist Oviedo, Attn: Sports Outreach 45 W. Broadway St., Oviedo, FL 32765 Make all checks payable to "First Baptist Oviedo"

PACKET PICK-UP

Pick up race packets at the First Baptist Oviedo Hangar from 5:00-7:00 p.m. on Thursday, May 24, Friday, May 25 or race day. Disposable chips provided by Race Time Sports will be attached to race number in race packet along with your shirt and other information. Team packet pickup available if requested by May 17.

CHECK-IN

Check-in is from 6:00-7:15 a.m. on May 26. If you have your race packet, you do not need to check in.

FOR MORE INFORMATION

Find out more information:

fbcoviedo.org/5k
 407-365-3484

sports@fbcoviedo.org
 Greater Oviedo 5k

REGISTRATION

Team Name (if any)

<-Check Here if Team is in Local Hero Category MI

LAST NAME

FIRST NAME

DATE OF BIRTH (mm/dd/yy)

RACE DAY AGE

I REGULARLY ATTEND: FBCO No Church Other Church (church name please)

I am a Current or Veteran

MILITARY FIRE POLICE EMT

SHIRT SIZE

YM YL S M L XL 2X 3X

GENDER MALE FEMALE

DAYTIME PHONE

Evening Phone

Email address (for Oviedo 5k info & future Sports events)(opt-out anytime)

STREET ADDRESS

CITY

STATE

ZIP CODE

Date Paid

For Official Use Only

Method of Payment:
 Check # _____ Cash /Amount \$ _____

Additional donation to the Michael Callin Memorial Scholarship Fund \$ _____

Make check payable to and mail entry form to:
First Baptist Oviedo
Attn: 5K Race
45 W. Broadway Street
Oviedo FL 32765
407-365-3484



INCOMPLETE OR UNSIGNED FORMS WILL NOT BE ACCEPTED
Waiver, Medical Release and Media Consent:

In consideration of my entry being accepted, I intend to be legally bound, and do hereby for myself, my heirs, and executors waive all rights and claims for damages which may hereafter accrue to me against Race Time Sports, First Baptist Oviedo, any of the above-mentioned races and their sponsors upon which I am entering, any subsidiary or political division thereof, its or their respective officers, agents, representatives, successors, assigns, and sponsors for any and all damages or injuries which may be sustained and suffered by me in connection with my association with entry or participation in the event as is mentioned above. If I should suffer injury or illness, I authorize officials of the race to use their discretion to have me transported to a medical facility, and I take full responsibility for these actions. I attest and certify that I am physically fit and have sufficiently trained for the completion of this event. I hereby grant full permission to any and all of the foregoing to use any photography, video tapes, motion pictures, recordings or any other record of this event for any purpose. Bicycles, baby strollers/joggers, dogs, inline/roller skates, or headphones are strongly discouraged.
I HAVE READ THE ABOVE RELEASE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.

SIGNATURE (if under 18, parent's signature required) _____ Date _____