

The UGA Alumni Association Presents the 5th Annual



# 5K RUN / WALK

SATURDAY  
MARCH 17, 2012  
8:00 AM

FUN RUN (AGES SIX AND UNDER)  
7:30 AM

Stegeman Coliseum  
100 Smith Street  
Athens, GA 30602

## **COURSE**

The starting line is located at Stegeman Coliseum beside the Rankin Smith Athletic Academic Center. The finish line is located at the Coliseum parking lot near the Carlton Street parking deck. The course map is available on the UGA Alumni Association website.

## **AWARDS**

Awards will be presented to overall Male/Female, Overall Male/Female Masters, and top three in age groups beginning with 10 years and under through 75 years and over. T-shirts will be given to participants who pre-register and to first-come, first-served, walk-up registrants.

## **REFRESHMENTS**

Provided after the race.

For questions or more information contact Wanda Darden at [wwarden@uga.edu](mailto:wwarden@uga.edu) or 706-542-2251.

## **REGISTRATION**

\$20 Early Bird  
\$10 No T-Shirt Option  
\$55 Family of Four  
\$25 Late Registration, After March 5th  
\$15 Late Registration, No T-Shirt  
\$150 Team of Ten  
FREE six years and under, registration still required

## **REGISTER ONE OF TWO EASY WAYS**

**By Mail:** Completed registration form and check made payable to the UGA Alumni Association can be mailed to:  
The UGA Alumni Association  
Attn: Dawg Trot  
Wray-Nicholson House  
298 S. Hull Street, Athens, GA 30602  
**Online at:** [www.alumni.uga.edu](http://www.alumni.uga.edu)  
(Registration must be postmarked or received online by March 9, 2012.)



[www.alumni.uga.edu](http://www.alumni.uga.edu)



Name \_\_\_\_\_ (please print)

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Gender (circle one) M F

T-shirt size – please circle YS YM S M L XL XXL No Shirt

Waiver: In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against officials and sponsors of the 2012 UGA Alumni Association Dawg Trot 5k Run/Walk for injury or illness, which may result directly or indirectly from my participation. I further affirm that I am in proper condition to participate in this event.

\_\_\_\_\_  
Participant signature (if under 18 – parent's signature is required)

\_\_\_\_\_  
Date

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Name \_\_\_\_\_ (please print)

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Gender (circle one) M F

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