

**Northeast Georgia Harvest Run
Runner Registration Form
September 25, 2010**

Name _____ Age _____ Male Female

Address _____

City _____ State _____ Zip _____

Size T-Shirt: Circle one: YS YL AS AM AL AXL AXXL

Event:

1/2 Marathon Fee: \$ 30 \$ _____

5K Race Fee: \$ 15 \$ _____

1-mile fun run/walk Fee: \$ 10 \$ _____

Amount paid \$ _____

Make checks and money orders payable to: American Red Cross

Mail to: UCCARC, P. O. Box 2814, Blairsville, Ga. 30514

You can register on-line at Active.com

For information, email unioncountycross@hotmail.com or call 706-835-1217

Participants agree to run and participate at their own risk

Northeast Georgia Spring Run Sponsorship Form

September 25, 2010

Name as it is to appear _____

Address _____

City _____ St _____ Zip _____

Level of Sponsorship

Sponsor receives one free t-shirt of the event.

\$ 200 Name on T-shirt, Sponsor board, Newspaper, Website

\$ 100 Name on Sponsor board, Newspaper, Website

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Sponsors can not register on line.

For information, email unioncountycross@hotmail.com or call 706-835-1217