



## 5K Registration Form

**When:** Saturday May 17, 2025

**Where:** City of Vilonia Softball Complex

**Time:** Check-in will be from 6:15a.m. – 6:45a.m.

**The 5K Race begins at 7:00 A.M.**

**Preregistration – Deadline May 3<sup>rd</sup> (Guaranteed a Shirt) 5k – Cost \$25.00 Race Day**

**Registration – After May 3<sup>rd</sup> (No Shirt Guaranteed) – 5k Cost \$35.00**

**Course:** The 5K begins and ends at the City of Vilonia Softball Complex.

**Awards:** 1<sup>st</sup> overall male and female finishers,  
1<sup>st</sup> three males and females in each of the following age groups:  
18 & under, 19-29, 30-39, 40-49, 50-59, 60 & older.

**Make Checks payable to:** VCDC

Mail to: VCDC  
PO Box 1043  
Vilonia, AR 72173

### Participation Information

Participant Name :

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Address:

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City:

State:

Zip:

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Email:

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Birthdate:

Age on 5/18/2024:

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Male:

Female:

Shirt Size:

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Emergency Contact Name & Number:

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**Continue on Back:**

**EVENT WAIVER – READ CAREFULLY:** In consideration of the acceptance of this entry. I hereby for myself, my heirs, executors, administrators, and anyone entitled to act on my behalf, release and discharge Vilonia Community Development Corporation, the City of Vilonia, their representatives and successors, promoters, managers, directors, officials, volunteers, sponsors, and administrators of this race from any and all claims of injury or liabilities of any kind, illness, or damage suffered by me, as a result of my participation in or traveling to or from this event. I understand that participating in a road race is a potentially hazardous activity. I should not enter and run or walk unless I am medically able and properly trained. I agree to abide by any decision of a race official to my ability to safely participate in the event. I assume all risk associated with running or walking in this event, including but not limited to, falls, contact with other participants, the effects of the weather, traffic, and the conditions of the road, all such risk being known and appreciated by me. I realize that this is a strenuous event that requires proper physical conditioning. I hereby certify that I am in such physical condition and good health. I also give my permission for the free use of my name and picture in any written account, broadcast or telecast of this event for any legitimate purpose. I understand that race fees are nonrefundable.

Signature:

Date:

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Parent or Guardian  
(If under 18)

Date:

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