



STUDENTS WORKING AGAINST TOBACCO

Dixie Twilight Walk/Run 5K

When: December 20th, 6:00 p.m.

Where: Dixie County High School

First Name _____ Last Name _____

Address _____ City _____ State _____ Zip Code _____

E-mail Address _____

Phone (____) _____ Date of Birth _____ Gender M / F

Age Division: 0-12 13-19 20-34 35-49 50-65+

Shirt Size: Youth S M L XL or **Adult** S M L XL XXL XXXL
(Finishers will receive a t-shirt)

Event: Race will start and finishes at DCHS football field. Check in at 5:30 PM. Race begins at 6PM

Registration Fees prior to race day: \$20 -adults / \$10 -students (Make checks payable to DCHS Advanced Placement Educational Tour)

Registration: May turn in forms to DCHS Library or to the DCHS front office

Return forms by mail to: DCHS Library 16077 SE 19 HWY Cross City, FL 32628

Email registration form to: lindseywhittington@dixie.k12.fl.us

Please read and sign liability waiver on the back of this form

Get Your Glow On!