

ENTRY FEES:

5K (7:30 A.M. START) \$30 (BEFORE APRIL 1) \$40 (AFTER APRIL 1) \$99 SKYWAY THEME TEAM*



10K (7:15 A.M. START) \$40 (BEFORE APRIL 1) \$50 (AFTER APRIL 1) \$149 SKYWAY THEME TEAM* KIDS 12 AND UNDER \$10

SAME DAY REGISTRATION - ADDITIONAL \$10

ALL RACERS GET GOODY BAG AND POST-RACE BREAKFAST!

NOT A RUNNER?

STROLL THROUGH THE BAYOU (9 A.M. OR AFTER) - WALK OR RUN YOUR OWN DISTANCE! DONATIONS APPRECIATED!

PROCEEDS TO BENEFIT THE SKYWAY MARINA DISTRICT

COURSE IS ON THE SKYWAY TRAIL THROUGH BEAUTIFUL CLAM BAYOU AND ENDS AT CERIDIAN!

PRIZES

OVERALL RACE WINNERS WILL BE CROWNED MAY DAY KING AND QUEEN. PRIZES ALSO GIVEN FOR AGE CATEGORY WINNERS! PRIZES SPONSORED BY SAUCONY.

*THEME TEAMS - SIGN UP AS A TEAM WITH A SKYWAY THEME AND SAVE! TEAMS OF UP TO 4 PEOPLE CAN REGISTER AND MOTIVATE ONE ANOTHER! PRIZE FOR THE BEST THEME!

FAMILY FESTIVAL AT CERIDIAN

9 A.M. - NOON
FREE ADMISSION
FOOD
PRIZES
ACTIVITIES AND GAMES
TRICYCLE RACES
BICYCLE RODEO
WELLNESS CLASSES/INFO
VENDORS
MAY DAY DANCING
AND MORE!







FOR MORE INFORMATION OR TO REGISTER GO TO ACTIVE.COM OR SKYWAYMARINADISTRICT.ORG

Like us on Facebook











saucony

























Skyway Marina District May Day Race and Family Festival Hosted and sponsored by Ceridian

DATE AND TIME: May 2, 2015. Races start at 7:15 a.m.(10k) and 7:30 a.m.(5k). The family festival will begin at 9 a.m. following the races.

RACE LOCATION AND DESCRIPTION: The race will begin and end at or near the Ceridian campus and will travel through beautiful Clam Bayou on the Skyway Trail. 10k participants will also travel south on 37th Street South on the trail. All portions of the race will be on the paved trail. This race will be professionally chip-timed, and all results will be posted on www.coolrunning.com following the race. Following the race, participants can enjoy food and beverages, a yoga session, awards, and lots of fun events at our Family Festival. All participants should park at the Ceridian campus.

ADDRESS AND DIRECTIONS: Ceridian 3201 34th Street South, Saint Petersburg, FL 33711. From 275 Southbound: Take exit 19 to 22nd Ave. S. Keep right to merge onto 22nd Ave. S. and take a left onto 34th Street South (US-19). From 275 Northbound: Take exit 17 (left exit) toward US-19/FL 682/Pinellas Bayway. Continue straight at the end of the exit onto 34th Street South (US-19). Ceridian is on the West side of 34th Street South.

AWARDS: Top male and female racers will receive May Day Race Awards. Prizes will also be given for the top three in age groups. Age groups will include children and adult divisions in increments of 10 years.

PROCEEDS: Proceeds will benefit the Skyway Marina District Association (a registered 501c3).

ENTRY COST INFORMATION:

Signature

Parent or Guardian if under 18

5K - \$30 (before April 1); \$40 (after April 1); \$99 Skyway Theme Team (up to 4 people) 10K - \$40 (before April 1); \$50 (after April 1); \$149 Skyway Theme Team (up to 4 people) Kids 12 and under \$10; Additional \$10 for walk up registrations.

REGISTER ONLINE AT WWW.ACTIVE.COM OR COMPLETE THE REGISTRATION FORM BELOW AND MAKE CHECKS PAYABLE TO: Skyway Marina District, Inc., 4601 34th Street South, #106, Saint Petersburg, FL 33711.

Packet Pick Up and Updated Race Information will be sent out to all racers at least one week prior to the race via e-mail. If you do not provide an e-mail address, please check our Web site or Facebook page for updated information.

CONTACT: Kristen Mory 727-688-9597; E-Mail: maydayrace@yahoo.com; Website: To register, go to active.com or for more information and event updates, check the Website at www.skywaymarinadistrict.org and our May Day Race and Family Fun Festival page on **1** Facebook. Results will be posted on coolrunning.com

* The Famly Fun Festival is free; only race participants need to register.

	DETACH HERE	
, , ,	n Form and Liability Waiver - PLEASE PRINT LEGIBLY be postmarked by April 15, 2015	
	il to: Skyway Marina District, May Day Race, 4601 34th Street South, #106, Saint Peter	sburg, FL 33711.
First Name	Last Name	
Address		
City, State Zip		
Phone	E-mail	
	L XL NONE (Register by April 1 to guarantee	shirt)
Age on Race Date (one size) Gende		
Name of Skyway Theme Team (if applic	ole)	
Amount Enclosed \$	I am interested in being a volunteer	
medically able and properly trained, and by my signature,	tivity, which could cause injury or death. I will not enter and participate unless ertify that I am medically able to perform this event. I agree to abide by any dec ncluding the right of any official to deny or suspend my participation for any re	ision of a race of-

I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the trail, etc., all such risks being known and appreciated by me. In consideration of your accepting this entry, I, the below signed, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release and any all rights and claims for damages I may have against the race, and sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will follow all rules for this event, and that I am physically fit and sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeliness, as well as

Date

any photographs and any record of this event in which I may appear for any legitimate purpose, including advertising and promotion.