



# The 14th Annual Run for The Gift

November 1-December 5, 2021

In Person: Saturday, November 13th, 2021 @ 7:00am

BENEFITING THE GIFT OF SWIMMING'S MISSION

To provide access to drowning prevention resources and education for the community's underprivileged, mentally or physically challenged or otherwise disadvantaged.

BECAUSE EVERY CHILD DESERVES TO LEARN TO SWIM

### Date/Time

Saturday, November 13, 2021

@SWA

Start time: 7:00 am

Kids' Run: 8:15 am

\*Virtual Run: November 1 -December 5

### Entry Fee

1 Race: \$25.00

2 Races: \$35.00

3 Races: \$45.00

\*Price increases after Oct. 16th.

### I plan to run:

\*Check all that applies

5K 'virtual'

5K In person at SWA.

10K

Half-Marathon

### Proud Sponsors



Michael P. DiMauro, D.D.S, P.A  
Dentistry for Adolescents and Children



SouthWest Aquatics MorganStanley

### Registration

Registration is available:

• On-line at

<https://runsignup.com/Race/FL/WinterGarden/RunfortheGift?remMeAttempt=>

• Mail/Drop off form at SWA

• Call (407) 905-0999

Race packets will be available for pick up at SouthWest Aquatics Friday, November 12th from 10 am to 6:30 pm or day of race beginning at 6:15am

### Awards Ceremony

Awards Ceremony following Kids' Run.

Awards for Top 3 Overall Male & Female and

Top 3 Male & Female in each age group.

### Registration Form

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Sex: M/F

T-Shirt Size: S M L XL Address \_\_\_\_\_ City \_\_\_\_\_

St \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_ Phone \_\_\_\_\_ Age \_\_\_\_\_

Birthdate \_\_\_\_\_ Emergency Contact \_\_\_\_\_ E.C. Phone \_\_\_\_\_

For Race or Sponsorship Information Call (407) 905-0999 or E-mail [thegiftofswimming@yahoo.com](mailto:thegiftofswimming@yahoo.com)

Make checks payable to: Credit Card: MasterCard Visa

The Gift of Swimming Card Number \_\_\_\_\_ V-Code \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

By signing below, I acknowledge that participating in this event is a potentially hazardous activity. I, and/or my minor child, should not enter unless medically able and properly trained. I and/or my minor child agree to abide by any decisions of race officials relative to ability to safely complete race and assume all risks associated with participating, including, but not limited to falls, contact with others, effects of the weather (including but not limited to high heat and/or humidity, etc.), traffic and conditions of the road, death, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, in consideration for accepting my and/or my child's entry, I for myself or on behalf of my minor child, and anyone to act on my and/or my minor child's behalf, waive and release Run 4 a Cause, The Gift of Swimming, SouthWest Aquatics, City of Winter Garden and any and all sponsors, and all of their respective representatives and successors (the "Releasers") from all claims or liabilities of any kind arising out of my participation including any liability which is attributable to the negligence of the Releases. Further, I hereby consent and grant permission to the Releases to use photographs and videos of me and/or my minor child without any compensation. I understand I shall not have any right to review or approve of any material.

Signature \_\_\_\_\_

Date \_\_\_\_\_

(Parent if under 18 years)