



PUZZLE RUN 5K & 10K

Saturday, September 19, 2009 at 7:30AM

Benefiting: The Autism Society of Greater Orlando

Location/Directions: Lake Louisa State Park:
7305 US Hwy 27, Clermont, FL 34714
From FL Turnpike, go West on State Rd 50 (6.6 mi)
Take US Hwy 27 South (8.3 mi)
Turn Right into Lake Louisa State Park
Directions for parking will be given as you enter the park. Park Rules: Do not park on the side of the road. Follow posted MPH.

Registration:

Online Registration-ends midnight Sept 17th
eNetFirst.com/puzzlerun/

Registration questions? eMail:
Support.puzzlerun@enetfirst.com

Packet Pick-up (You may also register at this time-Checks or Cash only):

Sept 18th 9:30 AM – 6 PM at Gear for Multisport located inside the National Training Center, 1109 Citrus Tower Blvd Clermont, FL 352-394-7434
Race morning: 6:15 – 7:00 AM

Awards:

Top 3 Male and Female for 5K & 10K
Top Male & Female in Age Groups: under 19, 20-29, 30-39, 40-49, 50-59, 60-69, and over 70

Aid Stations: Water, Gatorade, and Energy Gels will be available at miles 1, 2, 4, and 5. Refreshments will be provided at the finish line.

Entry Fees:

June 1st – Aug 31st \$25 – w/o race shirt
\$35 – w/race shirt*
Sept 1st – Sept 18th \$30 – w/o race shirt
\$40 – w/race shirt*
Race Day \$40 --w/o race shirt
\$50 – w/race shirt*

*Race shirts will be high quality, dry-tech singlets. Orders placed after Sept 9, 2009 will be limited to stock on hand.

Run is scheduled Rain or Shine – No Refunds

Proceeds: Your participation in the Puzzle Run 5K & 10K benefits the Autism Society of Greater Orlando. The ASGO supports local families living with autism. Go to www.ASGO.org to learn more.

Goodies: We will have Random drawings for donated prizes such as: dinners, massages, shoes, etc. So stick around after you're done!



Title Sponsors:



Mail in Registration: Postmarked no later than **Sept 6, 2009.** *Make checks payable to - Tri With Sway*
Mail completed entry to: **The Puzzle Run, c/o eNetFirst, Inc., 1002 Maple St., Carrollton, GA 30117**

Name: _____ Age: _____ Date of Birth: _____ Sex: M / F

Street Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Cell: _____ 2nd Phone: _____

Amount Enclosed: _____ (ASGO donations gratefully accepted) Singlet Size (please circle): S M L XL XXL

All participants MUST sign a waiver at event check in – under 18 will require a parent/guardian signature.