

GLOW RACE

FRIDAY, OCTOBER 26th

REGISTRATION FORM

Racer's Name _____ Age _____ Grade _____ Male Female
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Racer's Name _____ Age _____ Grade _____ Male Female
Parents E-mail _____

\$10.00 per racer by October 26th

\$15.00 per racer on Race Day

Please return this form to St. Frances Cabrini School office

Check in will begin at 5:00 pm in front of the church

RACES – Please put racers name by time they will participate. If they want to do the bike and running, it is only \$10, but they will only receive 1 glow necklace.

BIKE RACE

6:00 PM (Ages 10 and up) _____

6:15 PM (Ages 6-9) _____

6:30 PM ((Ages 3-5) _____

FUN RUN

7:00 PM _____

Please send your registration to:

**St. Frances Cabrini School
GLOW RUN
2215 E. Texas Ave.
Alexandria, LA 71301**

FOR OFFICE USE ONLY

Family Registration: _____

One Child Registration: _____

Total: \$ _____

Check # _____

Cash \$ _____