

## Fifteenth Annual Tough Ten / Tough Two

*in memory of our beloved community leader and dedicated runner, Dr. Nicholas (Nick) Holler*  
presented by Auburn Opelika Running and Track Association [A.O.R.T.A.] and Big Dog Running Company

A Race with a Mission ... benefitting the **East Alabama Medical Center's Foundation for Breast Cancer Early Detection**. The Breast Cancer Early Detection Center serves to provide free mammogram screenings for women who are uninsured, as well as to educate women in our community on the benefits of breast self examination and annual screenings.

**When:** Saturday, October 11<sup>th</sup>, 2014 – 7:30am

**Where:** Ogletree Village, Auburn [corner of Moores Mill and Ogletree Roads]

**Registration:** \$25 for Ten Mile [participants registered by Sept. 30<sup>th</sup> guaranteed tee shirt]; Day of registration = \$30  
\$15 for Two Mile [participants registered by Sept. 30<sup>th</sup> guaranteed tee shirt]; Day of Registration = \$20

**\*\*\*Early Bird Discount:** Register by **August 11<sup>th</sup>** [postmarked by August 11<sup>th</sup>] for discounted fee of:  
\$20 for ten mile / \$10 for two mile

In observance of National Breast Cancer Awareness Month, all participants will be given a pink ribbon to show support and hope for a cure. Awards will be presented to top three male/female overall finishers and top three in age group.

**Name:** \_\_\_\_\_

**Race:** \_\_\_\_\_ **10 Mile** \_\_\_\_\_ **2 Mile**      **Age:** \_\_\_\_\_      **Date of Birth:** \_\_\_\_\_      **Sex:** \_\_\_M\_\_\_F

**Address/City/State/Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_      **Email:** \_\_\_\_\_

**Tee Shirt Size:** **Adult** \_\_\_S\_\_\_M\_\_\_L\_\_\_XL\_\_\_XXL

**Youth** \_\_\_S\_\_\_M\_\_\_L

**Waiver/Release:** In consideration of acceptance of this entry, I hereby waive any and all claims for myself and my heirs against the Auburn Opelika Running and Track Association, Big Dog Running Company, and any other sponsors and officials involved in the Tough 10 / Tough 2, for injury or illness that may result directly or indirectly from my participation in this race. I further state that I am in proper physical condition to participate in this race.

By submitting this entry, I acknowledge having read and agreed to the above waiver release and indemnification.

**Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_

[Parent or Guardian if under age 18]

**Please make checks payable to AORTA and mail to:**

**Summer Vaughan**  
**re: Tough 10 / Tough 2**  
**2631 Beehive Road**  
**Auburn, AL 36832**

Should you have any questions, please contact Summer Vaughan at [auburntough10@gmail.com](mailto:auburntough10@gmail.com)

**Thank you for your support!**