

TEAM REGISTRATION FORM



8AM / SATURDAY / BOERNE MAIN PLAZA
JUNE 6, 2026

REGISTER ONLINE AT:
aidthesilent.com/5K

All proceeds will benefit Aid the Silent. Funds collected will help equip deaf and hard-of-hearing children and teens with the necessary tools to find personal success through offering the monetary resources to fund Deaf Ministry, Deaf Education, Deaf Awareness and Deaf Resources.



Register Now!

PRESENTED BY



ENTRY FEES:

4/14/26 Early Bird (guaranteed shirt): \$35
4/14/26 – 5/15/26: \$40
5/16/26 – 6/5/26 (not guaranteed shirt size): \$45
6/6/26 Race Day (shirts upon availability): \$50

REGISTRATION:

Online: aidthesilent.com/5k (closes 6/6/26 @ 6pm)

Mail-in: (postmarked by 5/20/26)

Please make all checks payable to Aid The Silent

Aid the Silent, 8126 Broadway, San Antonio, TX 78209

Email: info@aidthesilent.com

Phone: 210-868-6616

FREE ENTRY for deaf and hard-of-hearing

Contact Aid the Silent for special code 210-868-6616 (voice),
210-996-8648 (text) or email info@aidthesilent.com

PACKET PICK-UP:

Thursday, 6/4/26, 12-6pm

Aid the Silent, 8126 Broadway, San Antonio, TX 78209

Friday, 6/5/26, 11am-6pm

Rudkin Productions, 34910 IH-10 West, Bldg #701, Boerne, TX 78006

RACE DAY SCHEDULE:

7:00-7:40am Registration, Packet & Timing Chip Pickup

7:45am Pre-Race Announcements & National Anthem

8:00am Race Begins

AWARDS:

Gun-timed: Overall Male & Female

Chip-timed: Top 3 Male & Female in each age group
9 & Under, 10-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60+

Note: Age group awards will be based on chip time.

CREATE A TEAM!



- ✓ Recruit co-workers, friends & family!
- ✓ SAVE \$5.00 on each registration AFTER 10th team member signs up*
- ✓ Packet Pick Up – entire team in one box!

- ✓ Create your own t-shirts or add accessories to ours! Be creative & have fun!
- ✓ Individual team members will still be eligible for individual awards in their age divisions.

SAVE \$50 IMMEDIATELY!

When you sign up & pay for all team members on this form.

PRIZES FOR MOST CREATIVE TEAM & LARGEST TEAM!

* 10 people teams will receive a \$5.00 discount when the 10th person signs up. After the 10th team member signs up, a \$5.00 refunded will be credited to each team member individually.

**Team Registration
Form on back ▶**

TEAM/RACER INFORMATION & WAIVER

WAIVER: I, myself, or as a parent/guardian for the Aid the Silent 5K event participant, assume all risks of an injury, sickness or health defect including death, resulting from or receiving during participation in this race. In consideration of acceptance of this entry, I and anyone entitled to act on my behalf waive and release Aid The Silent, the City of Boerne, IAAP, all sponsors and assisting agencies from all claims or liabilities of any kind arising from participation in this event. I grant permission to be photographed and/or videotaped for media usage.

All participants are required to submit a waiver. Sign waiver line below to signify agreement.

Adult shirt sizes: ☐ S ☐ M ☐ L ☐ XL ☐ XXL **Youth shirt sizes:** ☐ YS ☐ YM ☐ YL

Best efforts will be made to approximate T-shirt count, however T-shirts are not guaranteed.

NAME OF RUNNER 1

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 2

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 3

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 4

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 5

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 6

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 7

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 8

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 9

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

NAME OF RUNNER 10

DOB Gender Shirt Size

Mobile #/email

Waiver: Signature (parent if participant is under 18) Date

TEAM NAME

PAYMENT: TOTAL ENTRY FEES: _____

____ Yes! We have a team of 10 runners on this form – deduct \$50.00. If you reach 10 members before the race - \$5.00 will be refunded to each member.

____ Team does not have 10 runners discount does NOT apply, use total above

Method of Payment ☐ Check ☐ Cash ☐ Credit Card
☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name on Credit Card

Card # Exp Date CVV

Billing Address of Credit Card Holder

Authorized Signature Date

Send completed forms to (postmark by 5/29/26) Aid the Silent, Attn: 5K 2026, 8126 Broadway, San Antonio, TX 78209 or email info@aidthesilent.com