Nova Southeastern University
College of Health Care Sciences
“Fun in the Sun Scholarship 5K Run”
Registration Form

$25 per registrant

Registrant(s):
1. ___________________________________________  T Shirt Size XS SM MED LARGE XLARGE XXLARGE

Phone: ____________________________ Email: ____________________________

Address: __________________________ __ City/Town: ____________________________

State: _______________ Zip Code: _______________ Country: __________________

Department: _______________________ Program Year: 1st, 2nd, 3rd, Faculty/Staff, Administration, other____

2. ___________________________________________  T Shirt Size XS SM MED LARGE XLARGE XXLARGE

Phone: ____________________________ Email: ____________________________

Address: __________________________ __ City/Town: ____________________________

State: _______________ Zip Code: _______________ Country: __________________

Department: _______________________ Program Year: 1st, 2nd, 3rd, Faculty/Staff, Administration, other____

3. ___________________________________________  T Shirt Size XS SM MED LARGE XLARGE XXLARGE

Phone: ____________________________ Email: ____________________________

Address: __________________________ __ City/Town: ____________________________

State: _______________ Zip Code: _______________ Country: __________________

Department: _______________________ Program Year: 1st, 2nd, 3rd, Faculty/Staff, Administration, other____

Total check amount enclosed: $____________________________

Check(s) made payable to:
NSU College of Health Care Sciences Scholarship Fund
Mail or drop off to:
Nova Southeastern University
College of Health Care Sciences
Scholarship 5K Race
Terry Building, Room 1277
c/o Kevin Kunkel, PT, PhD
3200 South University Drive
Fort Lauderdale, Florida 33328