



Coahoma Community College 5K/Run/Walk

Breast Cancer Awareness

Register Today: www.coahomacc.edu or mail entries to:
Athsicia Gooden
3240 Friars Point Road
Clarksdale, MS 38614

Date: Saturday, October 10, 2015

Location: Greyhound Bus Station, 210 3rd Street, Clarksdale, Mississippi

Distances: 5,000 meter (3.1 miles) foot race; 5,000 meter (3.1 miles) walk

Schedule: 6:30 a.m. Race day registration/race packet pick-up
8:30 a.m. 5K Run/Walk begins

Course: The course is relatively flat with one or two hills (after all, it's the Mississippi Delta).

Amenities: T-shirt guaranteed to all timely pre-registered walkers/runners
STRICT pre-registration deadline: October 3, 2015. To assure your t-shirt size, application form must be returned by October 3rd.
Plenty of goody bags; water table at half-way point; free post-race soft drinks & refreshments.

Fees: Make checks payable to: Coahoma Community College Foundation, 3240 Friars Point Road, Clarksdale, MS 38614

- \$15 Pre-registration entry fee for 5K participants
- STRICT pre-registered deadline-must be received by October 3rd.
- \$20 registration fee if registering on the day of race

Awards: No Awards will be given for this walk/run. A large portion of the generated proceeds will be given to a cancer research foundation.

Coahoma Community College 5K WALK/RUN

Name _____ Age on race day _____

Gender: M F

Address _____

Phone _____

E-mail _____

Amount Enclosed _____

Adult 5K T-shirt (circle one): S M L XL XXL

General Release: I know that strenuous exercise is a potentially hazardous activity and that I should not enter this event unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participating in this event including, but not limited to, falls, contact with other participants, the effects of the weather, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Coahoma Community College and any and all of its employees, the race organizers, and any of its employees, Coahoma County and any and all of its employees, representatives, or agents, the City of Clarksdale and any all of its employees, representatives or agents, and all sponsors, their representatives and successors, from all claims and liabilities of any kind arising from my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the person(s) named in this waiver. I understand that bicycles, skateboards, roller skates or in-line skates, and animals are not allowed in the race and I will abide by these restrictions. **Parents have to register persons under the age of 18.**

Signature _____ Date _____
(Parent/guardian must sign for entrants under 18)