



## 2013 Cocoa Beach Fall into Winte 3K rem/walk

Saturday, Oct. 26th, 2013 - 7:30 am

## 5K Run/W

Saturday, Oct. 26th, 2013 - 7:30 am

## eet vrinz

Cash or Check only accepted Through Oct. 5th \$20 Oct. 6-18th \$25 Oct. 19th-24th \$30 \$35 Race Day Family of (2) thru Oct. 18th \$35 \$55 Family of (2) Day-of-Race

## Stenner He of Edving-eet

Non participants (size of shirts not guaranteed to runners who register Day-of-Race)

Breakfast for non participants \$10 Awards

Top Male and Female Overall Top Male and Female Age Groups in the following age categories 14 and under, 15-18, 19-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, **55-59**, **60-64**, **65-6**9, **70-74**, **75-79**, **80+** 

Best Male & Female finishing in costumes

Top 2 family team finishers Best carved pumpkin

unizhe

West side of A1A



		Entry Fee
Last Name	First Name	Through Oct. 5th \$20
		Oct. 6-18th \$25
Address (street)		Oct. 19-24th \$30 Race Day \$35 Family of (2) thru Oct. 18th \$35 Family of (2) Day-of-Race \$55
City	State Zip Code	
		Date of Birth Age (on race day)
Day Phone	T-Shirt Size	Gender
	S M L XL XXL	M F Amount Enclosed
In consideration of my	entry being accepted. Listend to be legally bound, and do bereby for m	muself, my hairs, executors, waive and release

any and all rights and claims for damages which I may hereinafter accrue to me against the City of Cocoa Beach, and all other sponsors, contributors, or any subsidiary or political division thereof, its or their respective officers, representatives, successors and assigns for any and all damages or injuries which may be sustained and suffered by me in connection with my association with entry or participation in the "Fall Into Winter 5K Run". If I should suffer injury or illness I authorize officials of the race to use their discretion to have me transported to a medical facility and I take full responsibility for this action. I attest and certify that I am physically fit and have sufficiently trained for the competition in this event. I have read the above and understand that I am entering this event at my own risk.

Cash or Check only accepted

Make checks payable to Cocoa Beach Parks & Rec (CBRD) P.O. Box 322430 Cocoa Beach, FL 32932-2430

Date Signature Parent or Guardian, if under 18

