Saturday, April 13, 2024



2024 Theme Show: To Be Announced!



Costume contest for best dressed character!

Catherine Schweinsberg Rood Central Library Cocoa, FL

308 Forrest Ave. | Race times: 15K 6:30 AM; 2 Mile 6:45 AM

Register Online at: SCC15K.com

Questions? spacecoastclassic@gmail.com

Join us for the 38th running of this

Space Coast Runners road race. It's the only

15K in Brevard County!

RACE INFO

- ONLY 15K race in Brevard County! 9.3 miles or 2 Mof fun racing brought to you by Space Coast Runners
- Classic TV Show finisher medals for every race finisher
- Free race shirt guaranteed with paid early registration
- Early registration ends on 3/30/2024
- Fantastic food and drink for everyone
- · Rain or shine event, no refunds issued
- SCR Runner of the Year Series race #9
- Virtual race option is available

OF THE YEAR

ENTRY FEES: SORRY NO REFUNDS! Early Registration is before 3/31/2024

\$40 - 15K Adult \$45 - All 15K Registrations 3/31-4/12/2024

\$38 – 15K Student (18 & under) \$50 – All 15K Race Day Registrations

\$35 - 15K SCR Member

\$25 - 2 Mile Adult \$30 - All 2 Mile Registrations 3/31-4/12/2024

\$23 – 2 Mile Students (18 & under) \$32 - All 2 Mile Race Day Registration

\$22 - 2 Mile SCR Member

*CHOOSE VIRTUAL OPTIONAL: ADD \$6 FOR SHIPPING or PICK UP DURING PACKET PICKUP

PACKET PICKUP

Packet pickup at Running Zone-3696 N Wickham Rd, Melbourne

Thursday, April 11 - 10am to 6:30pm Friday, April 12 - 10am to 6:30pm

SATURDAY, APRIL 13 - RACE DAY

5:30 am Packet Pick Up & Race Day registration

6:15 am Late registration ends

6:30 am Space Coast Classic 15K starts

6:45 am SCC 2 Mile starts

8:00 am 2 Mile Award Ceremony

8:50 am 15K Award Ceremony

AWARD CATEGORIES

- Top 3 Overall Male & Female
- Top Masters (40+), Grand Masters (50+) & Senior Grand Masters (60+) Male & Female
- Top 3 in each Age Group for 15K & 2 Mile
- Top CoEd Team for 15K & 2 Mile

(Team must have a min of 5 members; must have 1 person of opposite sex)

15K & 2 MILE AGE GROUPS

8 & under (2M), 9-11 (2M), 12-14 (2M), 14 & under (15K), Both 15K & 2 Mile: 15-19 20-24 25-29 30-34 35-39 40-44, 45-49 50-54 55-59 60-64 65-69 70-74 75-79 80+



Signature:

MAIL COMPLETED ENTRY FORM TO:

P. O. Box 541837, Merritt Island, FL 32954
Please make check payable to:

| MINEIVO | Space Coast Runners |
|--|--|
| Name | |
| Address | |
| | St |
| Zip Code | Phone |
| Email | |
| Emergency C | ontact/Phone |
| Date of Birth | Age on race day |
| Race Distanc | e (cirlcel one) 15K 2Mile Virtual Yes/No |
| Sex (circle) | M F Promo Code |
| Choose One | Unisex shirt size YM XS S M L XL 2XL 3XL |
| Size Only | Women's shirt size XS S M L XL 2XL |
| | ill in below: 15K or 2 Mile Co-ED Team |
| Team Name:_ | |
| self, my heirs, and accrue to me again representatives, su sustained and suff | my entry being accepted, I intend to be legally bound, and hereby for n executors, waive all rights and claims for damages which may hereafter st the sponsors, officials, volunteers, and supporters of this race and an ccessors, or assigns for any and all damages or injuries which may be pred by me in consideration of my association with an entry or participa Classic 15K or 2 Mile event. If I should suffer injury or illness, I authorize |

In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which may hereafter accrue to me against the sponsors, officials, volunteers, and supporters of this race and any representatives, successors, or assigns for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the Space Coast Classic 15K or 2 Mile event. If I should suffer injury or illness, I authorize the officials of the race to use their discretion to have me transported to a medical facility, and I take full financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this race. I hereby understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk. I assume all risks associated with running in this event, including but no limited to: falls, contact with other participants, the effects of the weather, including but no limited to: falls, contact with other participants, the effects of the weather, including bigh heat and/or humidity, traffic and the conditions of the road. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. I further agree to abide by the Center for Disease Control's (CDC) recommendations for the prevention of the spread of the 2019 Novel Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC's guidance at: https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html. I assume all such risks being known, appreciated, and accepted by me. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event for a cancellation and by signing this waiver, I

| (Participant or Parent or guardian if under 18) |
|---|
| Date: |