



CINCINNATI CHRISTIAN ATHLETIC BOOSTERS 6TH ANNUAL RUN/WALK

SATURDAY, OCTOBER 26, 2019 AT 9:00 A.M.

JOYCE PARK- SHELTER #22, HAMILTON, OH

Join us on the scenic, paved (mostly flat) course along the Great Miami River
5K and 10K races start at 9:00 a.m. • 1 Mile and 5K walks start at 9:05 a.m.

Professional chip-timing for the 5K runners & walkers and 10K runners

Race proceeds support CCS athletic teams and also support Project Mañana & Changed Through Faith

REGISTRATION

HOW TO REGISTER

ONLINE REGISTRATION

www.RegistrationSpot.com

or

www.CincinnatiChristian.org

Deadline Thursday, October 24, 2019

MAIL REGISTRATION

Fill out the form(s) on the reverse side of this sheet
and mail to:

7474 Morris Rd.

Fairfield, OH 45011

Registrations must be received by

Wednesday, October 16 to receive a t-shirt!

REGISTRATION INFORMATION

PRE-REGISTRATION

ADULTS: 1 Mile and 5K- \$30, 10K- \$35

STUDENTS (18 and under): 1 Mile and 5K- \$20,
10K- \$25

FAMILY (2 adults + up to 4 students): \$100

SLEEP IN: Adults - \$30 / Students - \$20

(support the Boosters without breaking a sweat!)

RACE DAY REGISTRATION

8:00 a.m. – 8:45 a.m.

ADULTS: 1 Mile and 5K - \$35, 10K - \$40

STUDENTS (18 and under): 1 Mile and 5K - \$25,
10K - \$30

FAMILY (2 adults + up to 4 students): \$110

PRE-REGISTERED RACE PACKET PICK UP

Friday, October 25, 3:00-5:30 p.m. at the CCS JH/SH Campus, 7474 Morris Road
OR Saturday, October 26, 8:00-8:45 a.m. at Joyce Park - Shelter #22, Hamilton, OH

AWARDS FOR 5K & 10K RUNNERS

Overall top male and female runner

Awards to 1st and 2nd male and female finishers in each age group: 13-15, 16-19, 20-29, 30-39, 40-49, 50-59, 60+

1st and 2nd place elementary finishers in each age group: 8-9, 10-12

Make checks payable to: Cincinnati Christian Schools

On memo line, please include "Athletic Boosters Run/Walk"

Mail to: 7474 Morris Rd., Fairfield, OH 45011

For more information, 5k@cincinnatichristian.org or 513.892.8500

REGISTRATION FORM

NAME _____ Birthdate (include birth year) _____ Age _____

ADDRESS _____ CITY, STATE, ZIP _____

PHONE _____ E-MAIL _____

EMERGENCY CONTACT (name and phone number) _____

Gender (Circle): M F Alumni (Grad yr): _____ Previous Race Participant (Circle): Yes or No _____ years

Choose One (Circle): Sleep-In 1 Mile Walker 5K Walker 5K Runner 10K Runner \$ _____

Shirt Size (Circle): Y-S Y-M Y-L A-S A-M A-L A-XL A-XXL A-XXXL

*Waiver & Release: I acknowledge that my participation involves a risk of injury and I assume that risk.
I release Cincinnati Christian Schools, Inc. from any and all liability.*

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