

Orange Coast College Cross Country 5k

Saturday, September 17, 2011 @ Fairview Park

2501 Placentia Ave. Costa Mesa, California 92626

Come join the fun -Race - Run or Walk While supporting a fund-raising effort for the 2011 OCC Cross Country Team

- Race time:** 8:00 am – 5K OPEN run
Parking: Please park at Estancia High School next to Fairview Park. Park. We are reserving parking for the college teams that are racing after the open race.
Course: Consists mainly of scenic dirt trails and grass over rolling hills.
Awards: Top 3 finishers Male / Female, In the following Age Categories: 9 & under,10-11,12-14,15-18,19-24,25-29,30-34,35-39,40-44,45-49,50-54,55-59,60-64,65-69,70-74,75+
Results: www.runocc.com - posted after the race and online.
Breakfast: Complimentary pancake breakfast for all runners after the race.

Registration Make Check Payable to: "OCC Cross Country" - race and breakfast, NO SHIRT.

By Mail: Early Mail in registration
\$15.00 by August 31, 2011 RACE & BREAKFAST
\$20.00 BY September 13, 2011 RACE & BREAKFAST
\$25.00 Race Day RACE & BREAKFAST

Mail to : Orange Coast College Cross Country, Attn: Head Coach Marco Ochoa
2701 Fairview Road, Costa Mesa, CA 92628

Information: If additional information is needed please call Head Cross Country Coach Marco Ochoa @ 714-432-5890 or Assistant Coach Dave Fier @ 949-631-6441

CUT ALONG LINE: SIGN AND MAIL

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First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Sex _____ M _____ F _____ Age on race day _____

WAIVER: I hereby release Orange Coast College, County of Orange, the City of Costa Mesa, Orange Coast College Cross Country Team and all other sponsoring company(ies) or agency(ies) or individual (s) involved in the event from responsibility for any injuries or damages I may suffer as a result of my participation in The Orange Coast College Cross Country 5K Run. I hereby consent to received medical treatment which may be deemed advisable during this event and understand that I am solely responsible for all costs relating to medical transportation and/or evacuation. I will additionally permit the use of my name and pictures, broadcasts, telecasts, newspapers brochures, etc. and I also understand that the numbers are not transferable. As a participating athlete, I certify that I am in good health to participate in this event race and that all information provided in this form is true and complete.

SIGNATURE OF ATHLETE (OR PARENT IF ATHLETE IS UNDER 18)

DATE

