



COCOA YMCA CANDY CANE 5K RUN/WALK

SATURDAY, DECEMBER 17, 2016 @ 8:00AM

COCOA YMCA, 1519 CLEARLAKE RD. BLDG 18, COCOA, FL 32922

Call the YMCA @ 321-433-7770 for more info

Timetable:

Early Registration: now to

Friday, December 9 – 8:00pm

Late registration December 10-17

Saturday, December 17:

6:30 am Packet Pickup and Registration

7:30 am End of late Registration

8:00 am 5K Starts

Awards:

-Top Male & Female overall

Age Groups – Top 3 Male and Female

9 & under

10-13 40-49

14-19 50-59

20-29 60-69

30-39 70+

**Race T-Shirts given to the
1st 100 entries received!!**

Entry Fees:

Now thru Friday, December 9 – \$20

Late Entry Fee:

Sat. Dec 10 – Sat. Dec 17 - \$35

Cocoa YMCA Candy Cane 5K Run/Walk – OFFICIAL ENTRY FORM

Deliver or send completed entry form to: **COCOA YMCA, 1519 CLEARLAKE RD. BLDG 18, COCOA, FL 32922**

Must be postmarked by 12/9/2016 to assure we will receive the entry in time for the race.

Name _____

Address _____

City _____ State _____ Zip _____

Phone (daytime) _____ Email _____

Date of Birth ____/____/____ Age on Race Day _____

Sex: Male Female Please note adult shirt size: S M L XL

WAIVER – INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED

I understand the Central Florida YMCA assumes no responsibility for injuries or illness which I may sustain as a result of my physical condition or from my participation in any athletic activity sports programs, use of any equipment, exercise, or other activities. I expressly acknowledge on behalf of myself, and my heirs that I assume the risk for any and all injuries and illness, which may result from my participation in these activities. I hereby release the Central Florida YMCA, its agents, servants, and employees from any and all claims of injury, illness, death, loss or damage which I may suffer as a result of participation in these activities. I understand the Central Florida YMCA is not responsible for personal property lost or stolen while members and/or program participants are on premises. I give my permission to the Central Florida YMCA to use, without limitation or obligation, photographs, film footage, or tape recordings which might include my image or voice for purposes of interpreting YMCA programs.

I acknowledge the waiver set forth above, and being in sympathy of the YMCA, agree to sign the waiver.

Signature: _____

Parent or legal guardian if under 18: _____ Date: _____