

MetroHealth

Presented By:



Saturday, May 9, 2020

Location:

Urban Community School 4909 Lorain Avenue Cleveland, OH 44102

Race Day Schedule: 8:00AM:

5K & 1 Mile Run/Walk Start

Race-day Registration Race Packet Pick-up Wellness Fair Begins 9:30AM:



Urban Community School strives to break social and economic barriers to success for Cleveland's near west side children by providing an individualized, innovative, and challenging education. Rooted in the Ursuline Sisters' tradition of faith, character, and educational excellence, UCS engages our faculty, families, and community partners in the successful whole child development of our students.

Awards

Awards will be presented to the top 5K male and female runners overall, top 5K male and female UCS students and the top three 5K male and female runners in the following age categories:

> 7 & Under ~ 8-10 ~ 11-14 ~ 15-19 20-29 ~ 30-39 ~ 40-49 50-59 ~ 60-69 ~ 70 & Over

Mail-in registration must be received by Monday, May 4, 2020. Online registration closes at 9:00AM on Friday, May 8, 2020.

T-shirts guaranteed to pre-registered participants ONLY if registration received by FRIDAY, APRIL 17, 2020;

Additional race t-shirts subject to availability on race day.

Please make check payable to Urban Community School and mail to: UCS Development Office, 4909 Lorain Avenue, Cleveland, OH 44102 or register online at UCSrun.com.

Participant Information (PLEASE FULLY COMPLETE)

Name

Street Address (Including apt #)

City, State, Zip

Email Address and Cell Phone Number

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- \$50 Register Yourself and Sponsor a UCS Child
- _ \$30 **Day-of** Race Registration
- ___ \$25 Ages 11 and Up
- ____ \$15 Ages 10 and Under
- \$15 UCS Staff/Parent/Student
- \$ 5 UCS Staff/Parent/Student (NO SHIRT)

1-Mile Run/Walk

- \$20 All Ages
- \$15 UCS Staff/Parent/Student
- \$ 5 UCS Staff/Parent/Student

(NO SHIRT)

T-Shirt Size (CIRCLE ONE, IF APPLICABLE)

ΥM M

XL XXL None

Additional Info (REQUIRED)

Male____ Female____

AGE on Race Day_____

For more information or to make a gift, please contact Colleen DeJohn Pallett at 216.939.8441 or cdpallett@urbancommunityschool.org

FOR ADDITIONAL PARTICIPANTS, FILL OUT REVERSE SIDE OR ADDITIONAL FORMS AS NEEDED.

WAIVER

In consideration of your accepting this entry, I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Urban Community School, Greater Cleveland XC, the City of Cleveland, their representatives, and their successors, and assigns for any and all iniuries suffered by me in said event or in transit to and from said event. I further attest that I am physically fit and have sufficiently prepared for this event. I also provide permission to use photographs and/or video of me as a race participant in Urban Community School's publications.

Signature (Parent/Guardian if Under 18)	Date:

<u>Name</u>	5K Run/Walk \$50 Register Yourself and Sponsor a LICS Child	YM	YL	S	M	
	\$50 Register Yourself and Sponsor a UCS Child \$30 <u>Day-of</u> Race Registration	L	XL	XXL	None	
FILL OUT BELOW IF IN A	\$25 Ages 11 and Up \$15 Ages 10 and Under	Additional Info (REQUIRED)				
DIFFERENT HOUSEHOLD	\$15 Ages to and officer \$15 UCS Staff/Parent/Student		Male Female			
Street Address (Include Apt. #)	\$ 5 UCS Staff/Parent/Student (NO SHIRT)			aie)ay		
	1-Mile Run/Walk	•				
City, State, Zip	\$20 All Ages \$15 UCS Staff/Parent/Student		Cell Phone Number			
Email Address	\$ 5 UCS Staff/Parent/Student (NO SHIRT)					
PERSON 3 (PLEASE COMPLETE)	CHECK ONE:	T-Shir	t Size (CI	RCLE ON	NE, IF APPLICABLE)	
Name	5K Run/Walk	ΥM	YL	S	M	
	\$50 Register Yourself and Sponsor a UCS Child \$30 <u>Day-of</u> Race Registration	L	XL	XXL	None	
FILL OUT BELOW IF IN A	\$25 Ages 11 and Up	Additional Info (REQUIRED)				
DIFFERENT HOUSEHOLD	\$15 Ages 10 and Under					
Street Address (Include Apt. #)	\$15 UCS Staff/Parent/Student \$ 5 UCS Staff/Parent/Student (NO SHIRT)	Male Female				
	· · · · · · · · · · · · · · · · · · ·	Age o	n Race D	ay		
City, State, Zip	1-Mile Run/Walk \$20 All Ages	Cell	Phone	Numbe	<u>r</u>	
	\$15 UCS Staff/Parent/Student					
Email Address	\$ 5 UCS Staff/Parent/Student (NO SHIRT)					
PERSON 4 (PLEASE COMPLETE)	CHECK ONE:				NE, IF APPLICABLE)	
<u>Name</u>	5K Run/Walk \$50 Register Yourself and Sponsor a UCS Child	YM L	YL XL	S XXL	M None	
	\$30 Day-of Race Registration	L	ΛL	///L	None	
FILL OUT BELOW IF IN A	\$25 Ages 11 and Up \$15 Ages 10 and Under	ند:اد ۸	ianal Infa	/DEOLIII	BED)	
DIFFERENT HOUSEHOLD	\$15 Ages 10 and Under \$15 UCS Staff/Parent/Student	Additional Info (REQUIRED)				
Street Address (Include Apt. #)	\$ 5 UCS Staff/Parent/Student (NO SHIRT)		Male Female			
	1 Mile Dun AValle	Age o	n Race D	ay		
City, State, Zip	1-Mile Run/Walk \$20 All Ages		Cell Phone Number			
	\$15 UCS Staff/Parent/Student	<u> </u>	110110 1	1411150	<u>-</u>	
Email Address	\$ 5 UCS Staff/Parent/Student (NO SHIRT)					
PERSON 5 (PLEASE COMPLETE)	CHECK ONE: 5K Run/Walk	T-Shirt	: Size (CII YL		IE, IF APPLICABLE)	
<u>Name</u>	\$50 Register Yourself and Sponsor a UCS Child	Y IVI L	Y L XL	S XXL	M None	
	\$30 <u>Day-of</u> Race Registration	L	ΛL	XXL	None	
FILL OUT BELOW IF IN A	\$25 Ages 11 and Up		Additional Info (REQUIRED)			
DIFFERENT HOUSEHOLD	\$15 Ages 10 and Under \$15 UCS Staff/Parent/Student	Male Female				
Street Address (Include Apt. #)	\$ 5 UCS Staff/Parent/Student (NO SHIRT)	Age on Race Day				
	1 Mile Dun Avalle	Age of	ii Nace Di	ay		
City, State, Zip	1-Mile Run/Walk \$20 All Ages	Cell Phone Number				
· · · · · · · · · · · · · · · · · · ·	\$15 UCS Staff/Parent/Student	Cell	rnone	numbe	<u>r</u>	
Email Address	\$ 5 UCS Staff/Parent/Student (NO SHIRT)					

CHECK ONE:

PERSON 2 (PLEASE COMPLETE)

T-Shirt Size (CIRCLE ONE, IF APPLICABLE)