



Presented By:



MetroHealth



Saturday, May 9, 2020

Location:

Urban Community School
4909 Lorain Avenue
Cleveland, OH 44102

Race Day Schedule:

8:00AM:

Race-day Registration
Race Packet Pick-up
Wellness Fair Begins

9:30AM:

5K & 1 Mile Run/Walk Start

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

5K Run/Walk

- ___ \$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)

YM YL S M

L 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 injuries 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: _____

PERSON 2 (PLEASE COMPLETE)Name**FILL OUT BELOW IF IN A
DIFFERENT HOUSEHOLD**Street Address (Include Apt. #)City, State, ZipEmail Address**CHECK ONE:****5K Run/Walk**

- ☐ \$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)

YM	YL	S	M
L	XL	XXL	None

Additional Info (REQUIRED)

Male____ Female____

Age on Race Day____

Cell Phone Number**PERSON 3 (PLEASE COMPLETE)**Name**FILL OUT BELOW IF IN A
DIFFERENT HOUSEHOLD**Street Address (Include Apt. #)City, State, ZipEmail Address**CHECK ONE:****5K Run/Walk**

- ☐ \$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)

YM	YL	S	M
L	XL	XXL	None

Additional Info (REQUIRED)

Male____ Female____

Age on Race Day____

Cell Phone Number**PERSON 4 (PLEASE COMPLETE)**Name**FILL OUT BELOW IF IN A
DIFFERENT HOUSEHOLD**Street Address (Include Apt. #)City, State, ZipEmail Address**CHECK ONE:****5K Run/Walk**

- ☐ \$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)

YM	YL	S	M
L	XL	XXL	None

Additional Info (REQUIRED)

Male____ Female____

Age on Race Day____

Cell Phone Number**PERSON 5 (PLEASE COMPLETE)**Name**FILL OUT BELOW IF IN A
DIFFERENT HOUSEHOLD**Street Address (Include Apt. #)City, State, ZipEmail Address**CHECK ONE:****5K Run/Walk**

- ☐ \$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)

YM	YL	S	M
L	XL	XXL	None

Additional Info (REQUIRED)

Male____ Female____

Age on Race Day____

Cell Phone Number