

ALL AGES WELCOME

# HOW 'BOUT A 5K FUN RUN?

## COASTAL BEND BLOOD CENTER 2009

FOOD, FUN & PRIZES



**2009 OUT FOR BLOOD**  
**5K RUN / 2Mi WALK**  
**SATURDAY, SEPTEMBER 12th**  
**COLE PARK, CORPUS CHRISTI, TX**



### Details

Saturday, September 12, 2009

- 6:00 am: Check-in
- 6:45 am: Warm-up
- 7:00 am: Fun Run Start
- 7:10 am: Fun Walk Start
- Awards Ceremony & Raffle immediately following the event

**Pre-registration \$20; Kids 14 and under \$10**

**Group discounts available, contact the Blood Center for details.**

The race begins at the Cole Park Amphitheater, goes to the Lawrence Street T-Head, and ends back at the Amphitheater. There is a water and first aid station midway through the course and breakfast, fresh fruit, water and drinks at the end of the race.

### Awards

**Now Featuring an Electronic Timing System**

Medals will be awarded to 1st and 2nd place male and female in each age category, as well as overall male and female winners and overall male and female masters winners.

9 and under	20-24	35-39	50-54
10-14	25-29	40-44	55-59
15-19	30-34	45-49	60 & over
			Fun Walk

#### Packet Pick-up:

**Friday, September 11th, 10:00 am - 6:00 pm**  
Academy Sports + Outdoor, 5001 S.P.I.D.  
**Saturday, September 12th, 6:00 am - 6:45 am**  
Race Day Registration

### Sponsors



Return entry form & check payable to **Coastal Bend Blood Center**, c/o Breanna Rye, 209 North Padre Island Dr., Corpus Christi, TX 78406; [www.coastalbendbloodcenter.org](http://www.coastalbendbloodcenter.org)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Sex:  M  F  Runner (5K)  Walker (2Mi)

T-Shirt Size:  S  M  L  XL  Kid L (T-shirts are guaranteed for the first 500 registered participants.)

#### Waiver of Liability

In consideration of the acceptance of this entry, I, the undersigned, do waive any and all claim for myself and the heirs against officials and sponsors of this event, the Coastal Bend Blood Center or any person(s) involved in helping, for any injury which may directly or indirectly result from the entrant's participation. I further state that the entrant is in physical condition to participate in the event. I also understand there are traffic hazards for which officials and sponsors cannot be responsible. Further, I hereby grant full permission to any and all of the foregoing to use my name, photographs, video-tape or any other recordings of me participating in this event for any publicity and/or promotional purposes without obligation or liability to me.

Entrant's Signature: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

(If entrant is under 18 years of age)