

COLUMBUS COMMUNITY HOSPITAL SANDY BARTA 5K RUN/WALK



Saturday,
Oct. 16, 2010

Beason's Park
Columbus, TX

Packet Pick-up: 6:30 to 7:30 a.m.

Run: 8:00 a.m.

Entry Fee: Adult \$15.00 (\$17.00 Race Day Entry)

Ages 18 and under \$12.00

1st Place Medals

2nd & 3rd Place Ribbons

Mail Entry To:

Betty Hajovsky, CCH

P.O. Box 865

Columbus, TX 78934

Checks Payable: Columbus Community Hospital

For More Information Call:

Betty Hajovsky

979-732-2372, ext. 608

Check and/or circle the following:

Name: _____

Division: Men Women

Age: _____ Male: _____ Female: _____

T-Shirt Size:

(Adult Sizes)

___ Small

___ Medium

___ Large

___ X-Large

___ XX-Large

Age Group:

0-9 10-14

15-18 19-24

25-29 30-34

35-39 40-44

45-49 50-54

55-59 60-75

75 & over

Address: _____

City, State, Zip: _____

In consideration of your acceptance of this entry form, I hereby release the sponsors, officials, owners of the facilities for this race and any and all groups, people or facilities connected with the 11th Annual Sandy Barta 5K Run/Walk for any and all injuries by me at said race. I further certify that I am physically fit and able to participate in the run/walk.

Credit Card Information: (Circle type of card)

Mastercard Visa Discover

Name on Card: _____

Card #: _____

Expiration Date: _____

Phone #: _____

Signature: _____

Signature _____ Date: _____

Breast Cancer Awareness