

ENTRY FEES:

5K Run: \$20 (register online prior to Nov. 5)
 \$20 online registration until Nov. 5th, after Nov. 5th \$25
 until online registration ends & \$30 on Race Day
 (Under 17 yrs \$15 online registration, \$20 Race Day)

ONLY CASH OR CHECK ON RACE DAY

Register online at:
 Wwww.racesmith.com/cobbscorner.html
 Wwww.ornmondchamber.com/cobs_corner_classic.html

Race professionally time by:

Course Certified by:



USATF FL 07027EBM (5K)
 5K Awards
 Top Male & Female overall
 Top 3 male & Female in age groups:

17-Under	18-29	35-39
30-34	40-44	45-49
50-54	55-59	65-69
70-74	75-Over	

Health/Fitness Club Team Challenge

Each team consists of at least three members with three fastest runners scoring. Runners must mark the "Health/Fitness Club Team" box and complete team name on the application.

Ormond Beach Scenic Loop & Trail

**Saturday
 November 19, 2011
 8:00 a.m.**

Each pre-registered runner/walker will receive:
 Commemorative T-shirt
 Goody Bag

DIRECTIONS

195 to the Ormond Beach exit (268). Proceed east on SR 40/Granada Blvd. to A1A (Atlantic Avenue). Turn left and proceed north on A1A for approx. 10 miles. Turn left on High Bridge Road and proceed to park.

BENEFICIARY

Proceeds from this event benefit the Ormond Beach Chamber of Commerce Leadership Program.
 "Educating tomorrow's leaders today"

Help out a needy family this holiday season by donating a non-perishable food item to Second Harvest Food Bank. Representatives will be on site the day of the race to accept donations. All donations are distributed in the Volusia County area where they are collected.



Registration: Make checks payable to: Ormond Beach Chamber of Commerce, 165 W. Granada Blvd., Ormond Beach, FL 32174; Attn: Cobb's Corner Classic. Call (386) 677-3454 to use a credit card for payment or for more information.

Name _____ DOB / / AGE _____ Sex M F AMNT ENCLSD \$ _____ CHOOSE ONE: 5K () 1 MILE ()
 ADDRESS _____ CITY _____ STATE _____ ZIP _____
 PHONE# _____ SHIRT SIZE: S () M () L () XL () XL () EMAIL _____

() HEALTH & FITNESS TEAM CHALLENGE - TEAM NAME: _____

I know that participating in this event is potentially hazardous activity. I should not enter unless I am medically able and property trained. I agree to abide by an decisions of race officials relative to my ability to safely compete. I assume all risks associated with participating in this event including but not limited to, fall, contact with other participants, effects of the weather, including high heat and/or humidity, traffic and the conditions of the road; all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself, and anyone entitled to act on my behalf, waive and release the City of Ormond Beach, the County of Volusia, The Ormond Beach Chamber of Commerce, RaceSmith and any and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participating in this event even though that liability may arise out of negligence on the part of persons named in this waiver.