2019 BRIDGE RUN ENTRY FORM

10K RUN/WALK APRIL 6 **KIDS RUN & WONDERFEST APRIL 5**

COOPER RIVER BRIDGE RUN

Harris Teeter Neighborhood Food & Pharmacy

****NO REFUNDS OR DEFERRALS! NO RACE DAY PACKET PICKUP!**

COOPER RIVER BRIDGE RUN

ANTICIPATED RUN FINISH TIME: (must choose one)

EVENT USE ONLY (LEAVE BLANK)

- ◯ RUN UNDER 40 MINUTES (VERIFICATION REQUIRED BELOW)
- ◯ RUN UNDER 45 MINUTES (VERIFICATION REQUIRED BELOW)
- ◯ RUN 45 TO 50 MINUTES (VERIFICATION REQUIRED BELOW)
- ◯ RUN 50 TO 60 MINUTES (VERIFICATION REQUIRED BELOW)
- ◯ RUN OVER 60 MINUTES
- ◯ WALK/RUN 3 HOUR TIME LIMIT

Verification Race Name _____ Date MM/DD/YY ___/___/___ Time MM:SS ___:___ EVENT CODE

VERIFICATION MUST BE FROM A CERTIFIED ROAD RACE (4/2018 - 4/2019). SEND SCREENSHOT OF FINISH TIME TO INFO@BRIDGERUN.COM.

RUNNER INFORMATION:

FIRST NAME _____ LAST NAME _____

EMAIL _____

ADDRESS _____

CITY _____ ST ____ ZIP _____

TEAM NAME _____

(Fill in team name only if you are forming a team of at least 5 participants)

PHONE #: _____

★ *BIRTH DATE (MM/DD/YY): _____ GENDER: M F

Emergency Contact

NAME:_____

PHONE #:_____

FREE BUS SHUTTLE CHOOSE ONE:

- ◯ Downtown/Calhoun at Anson
- ◯ Mt. Pleasant Towne Centre
- ◯ I will not take the bus
- ◯ Charleston Area Convention Center
- ◯ Mt. Pleasant - TBD

FILL IN T-SHIRT SIZE

Shirt included with entry

Adult Sizes: S M L XL XXL (XXL $2 additional)

Child Size (FILL ONE IN): S M

CHARITY CONNECTION DONATIONS: RUN FOR A CAUSE!

I choose to give an extra $_____ to:

- ◯ ALZHEIMER'S ASSOCIATION
- ◯ AMERICAN CANCER SOCIETY
- ◯ AMERICAN DIABETES ASSOCIATION
- ◯ BOEING CENTER FOR CHILDREN'S WELLNESS
- ◯ COASTAL CRISIS CHAPLAINCY
- ◯ LOWCOUNTRY FOOD BANK
- ◯ MUSC CHILDREN'S HOSPITAL
- ◯ MUSC CENTER DRUG AND ALCOHOL PROGRAMS
- ◯ PET HELPERS
- ◯ RONALD MCDONALD HOUSE
- ◯ SPECIAL OLYMPICS
- ◯ THRIVE SC
- ◯ WATER MISSIONS
- ◯ WINDWOOD FAMILY SERVICES

Cooper River Bridge Run
716 S. Shelmore Blvd., Suite #105
Mt. Pleasant, SC 29464
Office Hours: M-F 10am-5pm
(843) 856-1949
(843) 856-1950 (Fax)

Mailing Address:
CRBR
P.O. Box 22089
Charleston, SC 29413

Register Online!
VISIT US AT: WWW.BRIDGERUN.COM
info@bridgerun.com

★ PACKET MAILING! ★
Must pay fee to have packet mailed
NO RACE DAY PACKET PICK UP!
Must pick up at Expo

Cooper River Bridge Run
@CRBRIDGERUN
@CooperRiverBridgeRun

LIABILITY WAIVER & RELEASE: In consideration for allowing me to register and participate in the 2019 Cooper River Bridge Run and its' pre and post race activities ("Event"), I, agree to be bound by the terms of the Participant Consent, Waiver and Release from Liability Agreement ("Agreement") posted at http://www.bridgerun.com/register.php and further agree to read same between now and my participation in the Event. (The Agreement generally states that you assume all risks of participation in the Event and waive substantial rights.) If, after reading Agreement, I do not consent to be bound by the Agreement's terms, I further agree that I will not participate in the Event.

Signature Of Participant Or Guardian (If Under 18) _____

Date _____

Registration Dates and Pricing

10k Run/Walk:
$35 MAY-JUNE 2018
$40 JULY-NOV 15 2018
$45 NOV 16-JAN 15 2019
$50 JAN 16-FEB 15 2019
$55 FEB 16- SELL OUT

Kids Run:
Child:
$8 BEFORE 4/5/19
$10 at event
Adult: $12

NOTE:
One form per person per race

- ◯ 10K RUN/WALK 4/6/2019 $_____
- ◯ RACE PACKET MAILING $15 $_____
  - CHOOSE ONE (NO MAILING WITHOUT FEE)
  - ◯ YES (ONLY IF REQUESTED BY 1/15/19)
  - ◯ NO (I WILL PICK UP MY PACKET AT EXPO)
- ◯ KIDS RUN HAMPTON PARK 4/5/2019 $_____
  - $8 - KIDS $12 - ADULTS
- ◯ Taste of Bridge Run $15 $_____
  - Friday April 5, 2019 5pm-8pm
  - Downtown, Mt. Pleasant, North Charleston
- ◯ CRBR Tag - $10 $_____
  - CUSTOM TAG FOR BACK OF MEDAL
  - Mailed after race
- ◯ Boat Shuttle ($8 per ticket) $_____
- ◯ XXL T-Shirt ($2) $_____
- ◯ Charity Connection Donation $_____

PAYMENT OPTIONS ◯ Credit Card ◯ Check ◯ Cash

_____ _____ _____ _____

If paying with a credit card, fill in card number above ****NON REFUNDABLE****

Expires: MM / YY ____ Security Code ____

TOTAL: $_____