

15K & 2 MILE

RACE INFO

- ONLY 15K race in Brevard County! 9.3 miles of fun racing brought to you by Space Coast Runners
- Classic Florida alligator finisher medals for every race finisher
- Free race shirt guaranteed with paid early registration
- Early registration ends on 3/28/21
- Fantastic food and drink for everyone
- Rain or shine event, no refunds issued
- SCR Runner of the Year Series race #9 and the final ROY points race
- Virtual race option is available

ENTRY FEES: SORRY NO REFUNDS! Early Registration is before 03/29/21.

\$45 - All Registrations 3/29 - 4/10 \$40 – 15K Adult \$38 – 15K Student (18 & under) \$50 – All Race Day Registration \$35 - 15K SCR Member - 2 MILE

\$25 – 2 Mile Adult \$30 All Registrations 3/29-4/10 \$23 - 2 Mile Students (18 & under) \$32 - Race Day Registration \$22 – 2 Mile SCR Member

***CHOOSE VIRTUAL OPTIONAL: ADD \$5 FOR SHIPPING**

PACKET PICKUP

Packet pickup at Running Zone–3696 N Wickham Rd, Melbourne Friday, April 9 – 10am to 6:30pm Saturday, April 11- 10am to 5pm

SUNDAY, APRIL 11 - RACE DAY

5:30 am Packet Pick Up & Race Day registration 6:15 am Late registration ends 6:30 am Space Coast Classic 15K starts RACE MANAGEMENT B 7:00 am SCC 2 Mile starts 8:00 am 2 Mile Award Ceremony 8:50 am 15K Award Ceremony



AWARD CATEGORIES

- Top 3 Overall Male & Female
- Top Masters (40+), Grand Masters (50+) & Senior Grand Masters (60+) Male & Female
- Top 3 in each Age Group for 15K & 2 Mile
- Top CoEd Team for 15K & 2 Mile (Team must have a min of 5 members; must have 1 person of opposite sex)

15K & 2 MILE AGE GROUPS

8 & under (2M), 9-11 (2M), 12-14 (2M), 14 & under (15K), Both 15K & 2 Mile: 15-19 20-24 25-29 30-34 35-39 40-44, 45-49 50-54 55-59 60-64 65-69 70-74 75-79 80+

Sunday, April 11, 2021 **Quest Elementary, Viera**

8751 Trafford Drive | Race times: 6:30 AM and 7:00 AM

Race benefits The M.O.R.G.A,N Project and **Quest Elementary.**

Register online at SCC15K.com

Questions? Email spacecoastclassic@gmail.com

Join us for the 35th running of this Space Coast Runners road race. It's the only 15K in Brevard County!

POWER OF PIZZA CHARITIES A DRIVE, VIERA, FL 32940 Please make check payable to: Power of Pizza Charities
Name:
Address:
City:ST:
Zip Code: Phone:
Email:
Emergency Contact/Phone:
Date of Birth: Age on Race Day:
Race Distance (circle) 15K 2 MILE Virtual: YES NO
Sex (circle): M F Promo Code:
Unisex Shirt Size (circle): YM XS S M L XL 2XL 3XL
Fill in below: 15K or 2 Mile Co-ED Team
Team Name:

In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which methy for high accrue to me against the sponsors, officials, volunteers, and supporters of this race and any representatives, successors, or assigns for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the Eye of the Dragon 10K & Tail of the Lizard 2 Mile event. If I should suffer injury or ill-ness, I authorize the officials of the race to use their discretion to have me transported to a methical facility, and officials of the race to use their discretion to have me transported to a medical facility, and I take full financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this race. I hereby understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk. I assume all risks associated with running in this event, including but no limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. I further agree to abide by the Center for Disease Control's (CDC) recommendations for the prevention of the spread of the 2019 Novel Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC's guidance at: https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html. I assume all such risks being known, appreciated, and accepted by me. I understand that this event that I am not entitled to a refund if the event is cancelled before or during the event. medical facility, and I take full financial and legal responsibility for this action. I attest and

Signature:

(Participant or Parent or guardian if under 18)

Date: