Sponsored by CCHS Cross Country

December 5, 2026 @ 9 am

Start & finish at Capital Mall

(Dillard's parking lot)

Name: _____ Phone (____) _____-_____

Address _____City _____State _____Zip _____

Age _____ Male/Female _____

Shirt size: **XXL** **XL** **L** **M** **S**

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Questions: magnus.holmstrom@jcschools.us
573-645-6444

Register on-line at runjeffcity.org or mail this form with check payable to CCHS Cross country

$25.00 adult, $15 child (15 and under)
$20.00 for club members

Mail to: Capital City High School/Cross Country 1650 Cavalier Drive, 65109 JC

You can also register the morning of the event.

RELEASE: In the consideration of the acceptance of my entry, I, for myself, my administrators, executors and assignees, do hereby release, and discharge Capital City High School and all other sponsors for all claims of damages, demands and actions, whatsoever arising or growing out of my participation in said athletic event. I attest and verify that I have full knowledge of the risk involved in this event and I am physically fit and trained for this event.

Signature of entrant _____Date_____
(parent's signature if under 18 years of age)