Welcome to the 12th annual Titan Invitational. Due to the continued growth of our meet, we have scheduled all middle school races the day before the high school races. We have also added Elementary races for runners 6th grade and below. We are looking forward to another great meet.

Timing provided by ENDURO Timing. All 7th-8th grade team and elementary entries must be completed online at www.endurousa.com . If you do not already have an on-line entry account, you will need to visit the "ENDURO" website (www.endurousa.com). After you set up your account, you must UPGRADE your account to "Coach of Record (school meets)". The blue button to upgrade is in the upper-right hand corner of the Home Page. After you upgrade, click on "My Roster List" and continue.

2:00 pm Coaches Meeting

2:15 pm – 7th Grade Girls 2500m 2:45 pm – 8th Grade Girls 2500m

3:15 pm – 7th Grade Boys 3200m

3:45 pm – 8th Grade Boys 3200m 4:15 pm – 5th - 6th GradeGirls 1 mile

4:30 pm – 5th-6th Grade Boys 1mile

4:50 pm - 2nd – 4th Grade Girls 1000M

 $5:00 \text{ pm} - 2^{\text{nd}} - 4^{\text{th}} \text{ Grade Boys } 1000\text{M}$

LOCATION: The XC course is located behind the Carl Albert Middle School next to the high school football stadium. The MS address is 2515 S. Post Rd. Midwest City, Ok. Restrooms and concessions stand will be available.

ENTRY FEES: \$50.00 per each Middle School team entered (girls and boys are separate entry fees). \$200.00 if running all 4 divisions. \$10 per individual if less than 5 runners or running unattached. Elementary: \$10 per each Elementary runner.

Make check out to Carl Albert Cross Country

2009 S. Post Rd.

Midwest City, Oklahoma 73130

AWARDS: Individual medals for top 20 places in each MS race. Individual medals for top 20 in each Elementary race.

Contact Information:

Bill Case Carl Albert Cross Country Email: wcase@mid-del.net Cell (405)535-5703

NO PACING WILL BE ALLOWED

Elementary Registration Form

Please complete the following form and return to registration table Thursday, September 1st, 2022

Contact Information: Coach Bill Case wcase@mid-del.net Cell: 405-535-5703

Athlete's Name

School ______ Grade

I authorize emergency First Aid to be administered in case of injury and will assume responsibility for health, medical and accidental injury insurance for my child.

Parent/Guardian Signature