



Eastern Bank

trueblueSM Presents *The Third Annual*

OFFICER JAMIE COCHRANE MEMORIAL ROAD RACE

www.cochraneroadrace.com

Tel # 617.576.9860

10K ROAD RACE – 5K RUN/ FUN WALK – FREE KIDS FUN RUN [9:00am]

Officer Jamie Cochrane "S6" was an eight-year Quincy Police Veteran. He spent most of his career in the Special Operations Unit. Jamie was a kindhearted police officer who always went the extra mile. On September 10, 2006, Officer Cochrane was killed while riding his motorcycle. This race is held in Jamie's memory and all proceeds will go to various charities.

Date: Sunday, September 12, 2010 / Time: 10:00 a.m. Sharp

Entry Fee: \$25.00

Refreshments to all attendees.

DJ, raffles, and kids activities

****** T-Shirts provided to first 700 registrants ******

Registration 09/12/2010 from 8:00 - 9:30 a.m. @ Pageant Field, 1 Merrymount Pkwy

**** T-Shirts to first 700 registrants ****

Bib # pickup on Saturday, 09/11/2010 @ Pageant Field 2:00 PM - 5:00 PM

USATF Certified

Course: Start and finish outside Adams Field

Fast flat course including three miles of beachfront road

Prizes: To all 1st, 2nd, and 3rd place division finishers / Timing: Spitler Race Systems

Full Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Tel: _____ **Email:** _____

T-Shirt Size: ___ Med ___ Lg ___ XL ___ XXL

D/O/B: _____ **Age on Race Day** _____

Wheelchair Division: _____

Entrance Form – Please Print

Please mail your non-refundable check, made payable to

The Cochrane Road Race, to:

Cochrane Road Race

PO BOX 690268

Quincy, MA 02269-0268

Circle One In Each Category

Sex: Male Female

Distance: 10K 5K

Law Enforcement Officer: Yes No

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Sponsors, coordinating groups and any individuals associated with the event, the representatives, assessors and assigns will hold them harmless for any and all injuries suffered in connection with this event.

I attest that I am physically fit to compete in the Cochrane Road Race. Further, I grant full permission to any and all of the foregoing to use my photographs, videotapes,

motion pictures, recordings or any other records of this event for any legitimate purpose. **SIGNATURE:** _____ **DATE:** _____