



Titan Invitational

Middle School and Elementary

Thursday August 29th, 2024

Welcome to the 13th 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.

ON-LINE ENTRIES-Coaches must submit all entries on the ENDURO USA™ website: www.endurousa.com.
— **NO ADDITIONAL ENTRIES AFTER THE DEADLINE.** — **ONLINE ENTRIES DEADLINE: (**** INSERT DAY PRIOR TO MEET HERE ***)** at noon. Complete ALL the steps on the “Entries Window”. Make sure to “VERIFY”. **TEAMS WILL NOT BE ADDED AT THE MEET.** If you need help with your ENDURO USA™ account, please email your questions to jhughes@elginps.net.

MEET TIMING & RESULTS-RFID Chip Timing for the meet is provided by **12:1 Running Timing Services**. Live results are available at www.twelve1running.com.

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 Grade Girls 1600m
4:30 pm – 5th-6th Grade Boys 1600m
4:50 pm - 2nd – 4th Grade Girls 1600m
5:00 pm – 2nd – 4th Grade Boys 1600m

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 day of meet

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

Cut here – remove and turn in

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 _____