



Couch to 5K Registration Form

Name: _____ Age: _____
Address: _____ Date of Birth: _____
City: _____ State: _____
Phone: _____ E-Mail: _____

How did you hear about this training program? _____

Are you currently walking or running? YES / NO.
If yes please answer the below questions

How many miles per outing are you running/walking? _____
How many minutes per outing are you running/walking? _____
How many days a week are you running/walking? _____

Would you like for us to order you an official couch to 5K training shirt (\$20)?
Yes /No -

If yes please circle size: XS S M L XL XXL XXL

Fax completed form to 918-749-7564. For more information call Coach Kathy at
918-749-7557

