



Republic of the Philippines
Department of Education
REGION VII - CENTRAL VISAYAS
DIVISION OF CITY SCHOOLS - TAGBILARAN CITY

Office of the Schools Division
Superintendent

April 3, 2025

DIVISION MEMORANDUM
NO: 207 s. 2025

100TH FOUNDING ANNIVERSARY OF COGON ELEMENTARY SCHOOL

TO: Assistant Schools Division Superintendent
Chief, CID and SGOD
All Public Elementary and Secondary Principals
All Others Concerned

1. This Office hereby disseminates the **100th Founding Anniversary Celebration of Cogon Elementary School** on April 27, 2025.
2. One of the activities of the said celebration is a **Fun Run** which will commence at 4:00 AM at Cogon Elementary School. All interested individuals are invited to join the said activity.
3. Should you have any questions for further details feel free to contact this number **411-1564/09286013081** or at Cogon Elementary School facebook page.
4. Attached is the invitation letter for more details.
5. Immediate and wide dissemination of this Memorandum is desired.

WILFREDA D. BONGALOS PhD, CESO V
Schools Division Superintendent

WDB/JAAL/SGOD/MCC/fct



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Republic of the Philippines
Department of Education
 REGION VII - CENTRAL VISAYAS
 DIVISION OF CITY SCHOOLS - TAGBILARAN CITY
 COGON ELEMENTARY SCHOOL
 SAN JOSE ST., COGON, TAGBILARAN CITY

DepED
 TAGBILARAN CITY DIVISION
 COGON SECTION
 RECEIVED
 Date: 3/31/25
 Time: 4:57

March 31, 2025

DR. WILFREDA D. BONGALOS CESO V
 Schools Division Superintendent
 Tagbilaran City Division

DEPARTMENT OF EDUCATION
 TAGBILARAN CITY SCHOOLS DIVISION
 SDS OFFICE
RECEIVED
 BY: _____ TIME: _____
 DATE: 4/2/2025 CTR #: 04-07
 received SGOD: (SA)
 04/02/25 @ 3:49 pm

Dear Dr. Bongalos,

Greetings of health and wellness!

As we celebrate the 100th Founding Anniversary of Cogon Elementary School, we are pleased to invite all schools under the Tagbilaran City Division to participate in the Fun Run event on **April 27, 2025**. This exciting event aims to promote physical fitness, camaraderie, and school spirit among students, teachers, and stakeholders within our division.

The Fun Run will commence at **4:00 AM** at **Cogon Elementary School** and will follow a designated route within the city. We encourage students, teachers, parents, and school personnel to take part in this meaningful and historic celebration.

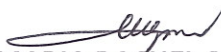
We humbly seek your support in disseminating this invitation to all schools within the division and encouraging their participation. Your presence and endorsement of this event will greatly contribute to its success.

Should you have any inquiries or require further details, please feel free to contact us at 411-1564/09286013081 or at Cogon Elementary School facebook page.

We look forward to your positive response and to celebrating this milestone together.

Thank you and more power!

Respectfully yours,


MARIA RACHEL S. OMASAS
 School Principal
 Cogon Elementary School



Address: San Jose St., Cogon District, Tagbilaran City, Bohol
 Tel. no: (038) 411 1654 |
 Email: 118706@deped.gov.ph

COGON ELEMENTARY CENTENNIAL RUN 2025

April 27, 2025

Registration Form

Category:

- _____ 12km (600php) - Event Shirt, Finishers Medal (acrylic 3.5 size), Race Bib, Snacks
- _____ 6km (500php) - Event Shirt, Finishers Medal (acrylic 3.5 size), Race Bib, Snacks
- _____ 6km STUDENT (200php) -Finishers Medal (acrylic 3.5 size), Race Bib, Snacks
- _____ 3km (400php) - Event Shirt, Finishers Medal (acrylic 3.5 size), Race Bib, Snacks
- _____ 3km STUDENT (200php) -Finishers Medal (acrylic 3.5 size), Race Bib, Snacks

Last Name: _____ First Name: _____ Middle Name: _____

Age: _____ Birth Date: _____ Gender: ___ F ___ M

Address: _____

Team/Group: _____ Contact Number: _____

Event Shirt/Singlet Size: __XS __Small __Medium __Large __XL __XXL __XXXL __

Contact Person & Contact # (in case of Emergency): _____

EVENT PARTICIPANT WAIVER AND RELEASE OF LIABILITY

I _____ hereby acknowledge that my participation in this event **COGON ELEMENTARY CENTENNIAL RUN 2025** involves a risk of bodily injury. I know that running a road race is potentially a hazardous activity and that I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity , traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the organizers of the **COGON ELEMENTARY CENTENNIAL RUN 2025** and any other sponsors, their representatives and successors from all claims all liabilities of any kind arising out of my participation in this event or carelessness on the part of the persons name in this waiver. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for legitimate purposes.

Guardian's Signature Over Printed Name (Below 18 years old).

Signature Over Printed Name

ACKNOWLEDGEMENT RECEIPT

I hereby acknowledge payment of registration fee P_____ for **COGON ELEMENTARY CENTENNIAL RUN 2025** from _____ with shirt/singlet size _____.
(Name of Runner)

Name & Signature of Authorized Personnel