

2015 APPLICATION

Please print

Name _____
First Last

Age _____ Daytime Phone: _____

Sex: M F

Address _____

Town _____

State/Zip _____

Email _____

(used for NY State Park Events only)

Running Club? _____

Checks Payable to - NHT - LI Check # _____

MANDATORY RELEASE FORM

I know that running a road race is a potentially hazardous activity and I assume all risks associated with running in this event, including but not limited to change in running surfaces, falls, contact with other participants or spectators, the effect of weather including cold, snow and ice, traffic and the conditions of the road, all such risks being known and appreciated by me. Therefore, in consideration of your accepting this entry, I, the undersigned, intending to be legally bound hereby for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against the State Park Run Series, New York State Office of Parks, Recreation and Historic Preservation, WALK Radio Station, Massapequa Road Runners, Runner's Edge, New Living Magazine, J & B Restaurant Partners, Natural Heritage Trust, Dover Caterers, Finish Line Road Race Technicians and their representatives, successors and assigns for any and all injuries suffered by me in said event and all claim for liabilities of any kind arising out of my participation in this event though liability may arise out of the negligence or carelessness on the part of the persons named in this waiver. I attest and verify that I will participate in this event as a foot-race entrant and that I am physically fit and have sufficiently trained for the competition of this event and that my physical conditions has been verified by a licensed medical doctor. Further, I grant full permission to any and all of foregoing to use any photographs, video tapes, motion pictures, recordings or other records of this event for any legal purpose whatsoever. In the event that an act of God necessitates the cancellation of the race, I understand that the sole responsibility of the race will be to provide a free race t-shirt for pick up at a time and place that will be announced. Athletes who participate in this competition may be subject to formal drug testing in accordance with TAC rules and IAFF Rule 55. Any athlete found positive for banned substances, or who refuses to be tested, will be disqualified from this event and will lose eligibility for future competitions. Some prescription and over-the-counter medications contain banned substances. Information regarding drugs and drug testing may be obtained by calling the USOC Drug Hot Line at 800-233-0393.

Signature _____

Drawing Coupon

Name _____

Address _____

Town _____ ZIP _____

Phone _____

5K WINTER RUN SCHEDULE

FUN THEMED RUNS

1/11 Heckscher USA Run

1/18 Robert Moses .. Crazy Hat Run

1/25 Caumsett Crazy Sock Run

2/1 Jones Beach ... Superbowl Run

All races begin promptly at 11 am

REGISTRATION

Only a maximum of 1100 full series participants will be accepted regardless of deadline dates.

ABSOLUTELY NO EXCEPTIONS!!!

For your convenience there are 3 ways to register:

By mail:

Winter Run Series
P.O. Box 247
Babylon, NY 11702



In person:

Long Island State Park Headquarters
Belmont Ave. EXIT 37N - So. State Pkwy.,
Babylon. Room 132
9am - 5pm, Monday - Friday

On line:

For a small fee, register online for full series or single races at: flrrt.com or active.com

**Absolutely No
Baby Joggers, Rollerbladers, Skaters,
Bikers or Pets Are Permitted!**

ENTRY FEE:

Full Series:

1. Individual pre-registration - \$ 40
2. Group Discount pre-registration ONLY (25 or more applications submitted at ONE time)-\$35 each **Before December 10th**

Single Race:

Day of Race Registration -
(NO GIVEAWAYS) - \$15.00 per race

**Make Checks Payable to: NHT - LI
NO REFUNDS WILL BE ISSUED IN THE
EVENT OF CANCELLATION DUE TO
INCLEMENT WEATHER**

**Receipt of Application
will NOT be sent by Mail**

NUMBER/SHIRT PICKUP:

In order to save time on race day, pre-registration pick-up will ONLY take place at the State Park Headquarters. Therefore, you MUST pick up your shirt and number prior to the 1st race.

Pickup Days & Times

Thursday, Jan. 8th - Friday, Jan. 9th
9:00 am - 7:00 pm
and
Saturday, Jan. 10th
10:00 am - 1:00 pm
at
Long Island State Park Headquarters
Belmont Ave. EXIT 37N
off the So. State Pkwy, Babylon

Numbers:

You will receive a running number and a race tag. You must wear the ONE number and race "tag" assigned to you to receive the correct results. Race crew is not responsible for error due to wearing incorrect numbers or race "tag".

Awards:

Medals will be presented to the first three male and female finishers per race, per age category.

Age Categories:

0-12, 13-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85 +.

Long Sleeve T- Shirt:

To all FULL SERIES participants ONLY!

Refreshments:

Beverages and snack foods will be distributed after all races.

Raffles:

Must be present to win.

Timing:

By Finish Line Road Race Technicians using Chronotrack Timing System.

All runners' times will be recorded and posted following each race.

<http://www.flrrt.com>

Directions to first race:

Heckscher State Park
L.I.E. (Rte. 495) to Sagtikos Pkwy., south, to Southern State Pkwy., east to Heckscher State Pkwy., east and south to park.

Please arrive **EARLY** to avoid traffic from late coming runners. Some park roads will be closed prior to 10 a.m. for preparation of race course. Late arrivals may have difficulty in reaching the starting line in time for the start of the race.

A special thank you to the Massapequa Road Runners Club for all their assistance in making the Winter Run Series a success.



For additional information please call
(631) 321- 3510
weekdays, 9 a.m.- 5 p.m.

Sponsored By:



Corporate Contributors:



LONG ISLAND STATE PARKS

2015



WINTER
RUN SERIES