The Adirondack Runners Presents...

5k Reindeer Run & Reindeer Run, Jr.

Saturday, December 3rd

5k Road Race Starts at 9:00AM

Children's Run immediately following

www.adirondackcampcomfort.com

LOCATION:	Adirondack Community College, Bay Rd, Queensbury, NY
REGISTRATION:	7:30-8:45AM. ACC Theater (Also packet pick-up)
COURSE:	3.1 Miles flat and fast
REINDEER, JR:	$5.00 - Children's fun run for ages 12 and under All children receive a finisher's medal. It is recommended that an adult accompany smaller children
ENTRY FEE:	$23.00 – ($20.00 for members of The Adirondack Runners) $25.00 Race Day
FEE INCLUDES:	Long sleeve tech wear shirt to first 150 entrants
FACILITIES:	Restrooms available
REFRESHMENTS:	Will be provided
AGE GROUPS:	1-12, 13-19, 20-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-69, 70& over
INFORMATION:	Becky D'Allaird (518) 696-6368 or reindeerrun@roadrunner.com
PROCEEDS:	*All proceeds from this race will go to benefit Cindy's Comfort Camp.* *A free, weekend sleep away camp for children and teens ages 6-17 years who have experienced death or serious illness of a parent or close relative.*

Bella's Little Angels

Your Chihuahua Breeders

www.bellaslittleangels.com

NYS License # 821

518-696-6368

Detach Here

Reindeer Run 2011

LAST NAME **FIRST** **ADULT SHIRT SIZE** **SM** **M** **LG** **XL**

ADDRESS **PHONE** - -

CITY **STATE/PROVINCE** **ZIP/POSTAL CODE**

Date of Birth (/ /) **5K** $23.00 **Kids Run** $5.00 **AGE(Race Day)** **SEX(M/F)**

In consideration of the opportunity to participate in this race I hereby remiss release and forever discharge the sponsoring agents their members & any other persons staffing this race in any claims & demands as a result of participating in this event. I also certify that I am in good physical shape. Further, I hereby grant full permission to any and all the foregoing to use any photographs, video tapes, motion pictures, recordings, or any other record of this event for any legitimate purposes. I realize there are dangers associated with distance running. I hereby for myself, heirs, executors, or assigns waive & release any and all claims I may have against Road Runners, the above listed sponsors, City of Glens Falls, Adirondack Runners, its officers and any race official for any injury, illness or property loss which might occur to me while competing in, traveling to, or returning from the events on October 30, 2010

SIGNATURE_____ DATE_____.

SIGNATURE OF PARENT (if under 18)_____

Make Checks Payable To: THE ADIRONDACK RUNNERS

Mail Entries To:

Adirondack Runners

C/O Rebecca D'Allaird

77 Horse Hill Road, Hadley, NY 12835-3716

ENTRY **$**_____

ADDITIONAL DONATION **$**_____

AMOUNT ENCLOSED **$**_____

Official Use

Date Recived:_____ Check #_____ Amount _____ Bib Number_____