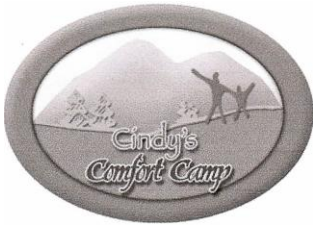


The Adirondack Runners Presents...



5k Reindeer Run & Reindeer Run, Jr.



Saturday, December 4th
5k Road Race Starts at 9:00AM
Children's Run immediately following
www.cindyscomfortcamp.com

biogen idec

Transforming Discovery Into Care[®]

LOCATION:
REGISTRATION:
COURSE:
REINDEER, JR:

Adirondack Community College, Bay Rd, Queensbury, NY
 7:30-8:45AM. ACC Theater (Also packet pick-up)
 3.1 Miles flat and fast

ENTRY FEE:
FEE INCLUDES:
FACILITIES:
REFRESHMENTS:
AGE GROUPS:
INFORMATION:
PROCEEDS:

No Entry Fee – 1 mile Children's fun run for ages 12 and under
 First 50 will receive short sleeve T-shirt, all children receive a finisher's medal. It is recommended that an adult accompany smaller children
 \$23.00 – (\$20.00 for members of The Adirondack Runners)
 Long sleeve tech wear shirt to first 150 entrants
 Restrooms available
 Will be provided
 5-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65& over
 Becky D'Allaird (518) 696-6368 or becky@bellaslittleangels.com
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.



Roger T. Biss MD, LLC

Bella's Little Angel's



Chihuahua Breeders
www.bellaslittleangels.com
 NYS License # 821



Adirondack Enrichment

A Speech Pathology, Occupational Therapy and Physical Therapy, PLLC
 Improving skills of children one child at a time

Smith Marine

Old Forge, New York
 315-369-9911
Sea-Doo Ski-Doo

Detach Here

5k Reindeer Run & Reindeer Run, Jr. Entry Form

Please mail entries to: The Adirondack Runners, c/o Becky D'Allaird, 77 Horse Hill Rd, Hadley, NY 12835
 Make Checks payable to: The Adirondack Runners

Please Print **Check one:** 5k REINDEER RUN REINDEER RUN, JR

Last Name: _____ **First:** _____ **MI** _____

Street Address: _____ **City/State** _____ **Zip** _____

Birth Date: _____ **Age on Race Day:** _____ **Sex: (circle one) Male Female**

T-Shirt Size (circle one) SM MD LG XL Telephone #: _____ **Email** _____

I know that participating in The Adirondack Runners events is a potentially hazardous activity. I agree not to enter and participate unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I am voluntarily entering and assume all risks associated with participating in the event, including, but not limited to, falls, contact with other participants, spectators or others, the effect of the weather, including heat and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant The Adirondack Runners its designee access to my medical records and physicians, as well as other information, relating to medical care that may be administered to me as a result of my participation in this event. Having read this waiver and knowing these facts, and in consideration of your acceptance of this application, I, for myself and anyone entitled to act on my behalf, waive and release The Adirondack Runners, Road Runners Club of America, The Town of Queensbury, and its agencies and departments, and all sponsors, and their representatives and successors, from present and future claims and liabilities of any kind, known or unknown, arising out of my participation in this event or related activities, even though such claim or liability may arise out of negligence or fault on the part of any of the foregoing persons or entities. I grant permission to the foregoing persons or entities to use or authorize others to use any photographs, motion pictures, recordings, or any other record of my participation in this event or related activities for any legitimate purpose without remuneration.

Signature: _____ **Date:** _____

Signature of Parent (if under 18) _____

<u>Official Use Only</u>	
Date Rec'd	_____
Check #	_____
Race Bib #	_____

REGISTER ONLINE AT WWW.ACTIVE.COM