

LONG ISLAND ROAD RUNNERS CLUB
PRESENTS THE
LIRRC 4 MILE RACE

WHERE: Field House, Scenic Eisenhower Park, East Meadow, NY. Near Parking Field #2.

WHEN: SUNDAY MARCH 4th, 2012, 9:00AM

FEE: ONLY \$5 FOR MEMBERS/ \$10 NON-MEMBERS
(Active Military Always Free, just show ID)

REGISTRATION: Day of Race 7:45AM-8:45AM

***PRE-REGISTER by mail for \$50 RAFFLE. *Entry MUST BE in by Thursday, March 1st to be eligible for a special raffle, a \$50 Running Edge Gift Certificate! (Fee same as day of race.)**

AWARDS: 3 DEEP IN AGE GROUPS: 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+

AMENITIES: Coffee, bagels, hot chocolate & RAFFLES!!!
(Cut here below and mail bottom with your check.)

CHECKS PAYABLE TO: LIRRC and

MAIL TO: LIRRC, 76 Elm St., Hicksville NY 11801

I know that participating in LIRRC 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 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 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, do hereby declare myself, my heirs, executors, administrators and assigns, do waive and release all rights and claims for any damages I may have against the Long Island Road Runners Club Inc., LIRRC race officials, officers, volunteers, the County of Nassau, the Nassau County Parks, Recreation, and Museums, and all the aforementioned representatives, employees, and successors, agents and assigns, for any and all injuries suffered by me in this LIRRC sponsored event.

Please Print Clearly and Completely

Male _____ Female _____ Member LIRRC Yes _____ No _____

Print Name: _____

Age: _____ DOB: _____ Zip Code: _____

Signature (Parent if entrant under 18 y.o.a) _____ Date: _____