



Saturday, April 7 2012

START TIME: 10:00am

at SUNY Adirondack Student Center

Proceeds benefit the Adirondack Samaritan
Counseling Center & WAIT House



Pre-registration: On or before March 31st, 2012— mail to
Glens Falls Rotary, PO Box 4702, Queensbury, NY 12804
or register online at www.active.com

Entry Fee*: ADULT \$20 AGE 12 & UNDER \$15 **Race Day**

Registration: 8AM to 9:15AM ADULTS \$25 AGE 12 & UNDER \$20.

Course: one small hill at start, then flat and fast.

T-shirts: available for the first 200 entrants (sizes not guaranteed)

Awards: Male and Female overall, age groups 1st, 2nd, 3rd

Name _____ M _____ F _____

Street Address _____

City _____ State _____ Zip _____

Age on race day _____ Phone _____ email _____

Shirt size S M L XL

Registration forms will be accepted at

*Checks payable to: Glens Falls Rotary Foundation Inc.



I know that running a road race is a potentially hazardous activity. I hereby attest I am medically able and properly trained to run. 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, fall, contact with other participants, the effect of the weather including high or low temperatures, wind, traffic and the conditions of the road, all such risks are being known and appreciated by me. For safety reasons, headphones should not be used and strollers, roller skates, etc are prohibited unless to accommodate the disabled. 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 Glens Falls Rotary Club, SUNY Adirondack, Town of Queensbury, Warren County, sponsors, volunteers and officials, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. Further, I consent and give permission to use my likeness and/or voice in photographs, motion pictures, records and/or other record of the Rotary 5K for any legitimate purpose.

Signature _____ Date _____

Signature of parent or guardian if runner is under 18 yrs. _____