



The Adirondack Runners



Four Mile Run – Saturday, February 4th 2012 – 10:00 am

Lake George Elementary School

Registration & Packet Pickup:

8:00 – 9:30 am at Lake George Elementary School, Sun Valley Drive, Lake George, NY
(Exit 21 off I-87 to Rt 9 North. Right on 9L. Go ½ mile make a right onto Sun Valley Drive)

Entry Fees:

Preregistered - \$20 (\$15 for Adirondack Runner members)
Race day - \$25 for all

Race Info:

Email: polarcap@adirondackrunners.org

Online: www.adirondackrunners.org

Online registration available through **Active.com**

Shirts to the first 175 registered. Sizes are not guaranteed.

Facilities:

Access to the elementary school cafeteria and bathrooms. No showers.

Awards:

No Duplicates. Age groups – Male and Female – 19 & under, 20-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75 & over. Walkers – overall 1st – 3rd

Race Proceeds to Benefit:

Upstate NY Autism Awareness & Sacred Heart Food Pantry

*** Bring a non-perishable food item for entry in a special prize drawing! ***

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Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Date of Birth _____ Age on Race Day _____

Sex: M F Shirt Size: S M L XL Walker? Y N

We ♥ our volunteers! If you're interested in helping out, please circle: Race Day Registration Safety Refreshments Bring Cookies Clean-up

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 cold, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant to 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 and Village of Lake George 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 and 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 (of parent if under 18) _____

Make checks payable to: The Adirondack Runners
Mail entries to: Adirondack Runners - Polar Cap c/o A. Hachem, 6 Bonner Dr, Queensbury, NY 12804