

MARCH 2010

No refunds, changes, or transfers.

One application per registrant. You may photocopy this form if you need additional entry blanks.

FOR OFFICE USE ONLY	
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WAIVER:

I know that participating in NYRR 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 to the Medical Director of this event and his 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 New York Road Runners Inc., Road Runners Club of America, USA Track & Field, the City of New York and its agencies and departments, USATF-Metropolitan, and all event 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.

NYRR Membership No.	E-mail Address		
Last Name (only one person per form)		First Name	
Race-day Age	Birth Date (month/day/year)	Sex	Day Phone
Race-day Emergency Contact (required)		Name	Phone
Mailing Address	PLACE MAILING LABEL HERE		
City	State (or country if not USA)	Zip Code	
Exact Name of Team			

Check if using: a wheelchair or a handcycle (Check only one)

X _____
Signature (or parent's signature if under 18)

PLEASE NOTE: ALL RACES WILL BE CAPPED.

Date (Check here to enter)	Event Name	Fee	NYRR Members	NYRR Junior/Senior Members	All Non-Members	
Sunday, March 7						
<input type="checkbox"/> 9:00 a.m.	Coogan's Salsa, Blues, and Shamrocks 5K (s) (q)	On or before February 20	\$17	\$9	\$30	
<input type="checkbox"/> 10:00 a.m.	Kids' Races (ages 2-12; separate application required)	February 21-March 6	\$22	\$15	\$35	
	Estimated pace per mile: _____	Limited race-day entries	\$25	\$20	\$40	\$ _____
		Kids' races are \$6 in advance and \$8 on race day				
Saturday, March 13						
<input type="checkbox"/> 8:00 a.m.	NYRR 8000 (8K) (s) (q)	On or before February 26	\$17	\$9	\$30	
	Estimated pace per mile: _____	February 27-March 12	\$22	\$15	\$35	
		Limited race-day entries	\$25	\$20	\$40	\$ _____
Sunday, March 28						
	New York Colon Cancer Challenge (please select only one event)					Walk Prices
<input type="checkbox"/> 9:00 a.m.	1.7M Remembrance & Prevention Walk	On or before March 13	\$17	\$9	\$30	\$17
<input type="checkbox"/> 9:00 a.m.	4M (s) (q)	March 14-27	\$22	\$15	\$35	\$22
<input type="checkbox"/> 10:15 a.m.	15K (s) (q)	Limited race-day entries	\$25	\$20	\$40	\$25
	Estimated pace per mile: _____					\$ _____

Note: Please confirm race details including start times by checking www.nyrr.org or calling 212.860.4455.

(s) Scored race.
(q) Counts toward the races NYRR members as of January 2010 need to qualify for guaranteed entry to the ING New York City Marathon 2011.
Note: Participants must be 12 years of age or older for NYRR events that are 10K and longer.

Credit cards are not accepted after number pickup begins.
Members must bring their NYRR membership card on race day to receive member discount.

All information is subject to change; please check the website for race updates, and to read more about capped races.

TO APPLY ONLINE (credit card payments only) www.nyrr.org**TOTAL PAYMENT \$ _____**

Fax and online registration for each race will close the Tuesday prior to the race at 11:59 p.m. (or earlier if the race has sold out). Entries received after that date will not be processed.

Enclosed is my check payable to NYRR. *Improperly written checks will be returned.*
PLEASE CHARGE MY: MASTERCARD VISA AMERICAN EXPRESS

TO APPLY BY FAX (credit card payments only)

Complete this form with your credit card information and fax it to New York Road Runners at 917.677.8841. Please do not call to confirm receipt of fax.

Credit Card #

Expiration Date (must be March 2010 or later)
month year

Card Security Code (CSC) **TO APPLY BY MAIL**

Complete this form and mail this entry and your payment (check or credit card information) to: March Race Entries, New York Road Runners, 9 East 89th Street, New York, NY 10128.
Entries received after a race has sold out will not be processed; fees will be returned.

Cardholder must sign here X _____

Note that there will be no confirmation of your acceptance. Your canceled check or credit card statement is your receipt.