



16th Annual AdirUNdack

EVERY Tuesday in May 2023

5K Trail Race Series & 25K

Sponsored in part by: Total Care and Rehabilitation Medicine, Steve Babson-Edward Jones, and Warren Tire

Challenge

Presented By: The Adirondack Runners

Bibs provided by: Road ID

During the month of May we will be holding a 5 race, 5k race series in Glens Falls. Come and Join in the fun. Whether you are looking for a race series for speed work or are new to the sport and want to run in a relaxed but challenging atmosphere. This Trail Race Series is looking to reward participation as well as competition for ALL runners. Come join us for one race or accept the challenge and run in all the races.

LOCATION: Cole's Woods (next to GF YMCA) Glen Street, Glens Falls, NY

CHECK-IN: Pre-Reg form below - Race starts promptly at 6:00 P.M.

Start line at track next to the YMCA, part of The Glens Falls Rec. Dept. 4/30/22 Must run 5 races to be eligible for award

ENTRY FEES:

\$10 Per Race or Sign up for ALL 5 \$30

DATES: Tuesdays ONLY - May 2, 9, 16, 23, 30 -3

DONATIONS :Proceeds to benefit Progressive Parenting EIN:85-338055

T-SHIRTS: Cotton short sleeve shirts guaranteed to first 75 registered for ALL 5 races by 5/1/23 RESULTS: Posted, No Ties, Decisions of Race Directors are FINAL.

AWARDS: Overall \*\*\* 1st Place Male & 1st Place Female Entry to '23 Trail Series

(non-transferable) \*\*\* 2nd Place Male & 2nd Place Female Entry to '23 Trail Series

\*\*\* 3rd Place Male & 3rd Place Female Entry to '23 Trail Series

\*May 30st Awards and RAFFLE prizes to be announced.

INFORMATION: Email: grabbelisadpt@gmail.com

LAST NAME FIRST MIDDLE INITIAL

Grid for last name, first, middle, and initial

SEX M/ F and Age race day grid

CITY/STATE(No Street Address Needed)

Grid for city and state

Grid for address

Phone Number grid

EMAIL ADDRESS(if you would like to be included in weekly results and future TAR races)

Grid for email address

CIRCLE SHIRT SIZE(S/M/L/XL/XXL)

5K Race \$10 \_\_\_\_\_ or 25K \$30\* by 4/30

Checks to: AdirUNdack Trail SMake Checks Payable to: The Adirondack Runners

Mail Entries, c/o Dan Olden, 39 John Clendon Rd, Queensbury, NY 12804



\*NEW WAIVER FORMAT ON BACK - MUST BE SIGNED PRIOR TO PARTICIPATION\*

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& 25K Challenge

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## WAIVER

I know that running and/or volunteering for a Trail race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, physical contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators including the potential contraction of a communicable disease resulting from contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators. I assume all risks including: the effects of the weather; high heat and/or humidity; freezing cold temperatures; traffic and the conditions of the road and/or including but not limited to the rough terrain of Cole's Woods/Glens Falls YMCA Track. I further agree to abide by the Center for Disease Control's (CDC) recommendations for the prevention of the spread of the 2019 Novel Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC's guidance at:

<https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html>. I assume all such risks being known, appreciated, and accepted by me.

I understand that bicycles, skateboards, baby joggers/strollers, roller skates or inline skates, animals, and personal music players are not allowed in the race, and I will abide by all race rules. 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 Road Runners Club of America (RRCa), City of Glens Falls, Town of Queensbury, Glens Falls YMCA Organization and Employees, Race Director Rebecca Smith, The Adirondack Runners and Volunteers and all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 in connection with my participation in this event and personally assume this risk.

I grant permission to all of the foregoing to use my name and/or likeness in photographs, motion pictures, recordings or any other record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

Signature Date:

Print Name

Signature (Parent or Legal Guardian if under 18)