

Last Name: _____ First Name: _____ No.: _____

2010 BOLTON SUMMER CROSS COUNTRY RACE SERIES

Dates: Thursday June 24
Thursday July 1, 8, 15, 22 & 29
Thursday August 5

Venue: Bolton High School - 72 Brandy Street, Bolton, CT, 06043 - Portable toilet available
Cancellation Information: 860-643-4552

Times: 6:00 pm - Boys & Girls ages 4 & under - 100meter race
6:10 pm - Boys & Girls ages 13 & under - 1 mile race
6:30 pm - Men & Women - all ages welcome - 2.6 mile race

Entry Fees: \$2 per Race.
\$14 Pre-Registration for Series
Makes checks payable to: **Bolton Summer XC Series**
Mailing Address: **Dani Kennedy, 44 Stonehedge Lane, Bolton, CT 06043**

Points System: Points will be awarded after each Race in each Age Category.

Awards: Prizes will be presented to the top point scorers at the end of the final race of the series (August 5). There is no minimum number of races you must run.

Age Groups: Boys & Girls - 100 Meter race - 4 & under - everyone wins!
Boys & Girls - 1 Mile race - 9 & under, 10-11, 12-13
Men & Women - 2.6 Mile race - 15 & under, 16-18, 19-29, 30-39, 40-49, 50-59, 60-69, 70+

Name: _____ Age (as of 6/24/10): _____ circle: M F

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

RACE WAIVER:

I know that a trail race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decisions made by the race officials relative to my ability to safely complete the race. I assume all risks associated with running in the Bolton Summer Cross Country Race Series, including but not limited to falls, contact with other participants, effects of the weather, including high heat/temperatures, low temperatures, rain, humidity, traffic, and trail conditions, all risks being known and appreciated by me.

Having read this release and knowing the facts, and in consideration of your accepting my entry, I, for myself, and anyone entitled to act on by behalf, or for my benefit, or, on behalf of my estate, waive and release the race director, race officials, The Town of Bolton, CT, and its Board of Education, The Silk City Striders and its Board of Directors, all sponsors of the race series, agents, volunteers, and all successors and assigns of each and every individual and entity named above, from any and all claims and/or liabilities of any kind arising out of my participation in any race conducted as part of this race series, even though the liability may arise out of the negligence or carelessness on the part of the persons or entities referred to in this waiver.

I also grant permission for the use of any photographs, motion pictures, videos, recordings, or any other record of my participation in any or all races held as part of this race series, for any legitimate purpose.

I understand that if the race is cancelled for any reason whatsoever, or for circumstances beyond the control of the race committee, race officials, and/or race sponsors, including but not limited to unsafe weather conditions, or governmental ban, my entry fee will not be refunded.

Signature: _____ Date: _____

Signature of Parent if runner is under 18

Special thanks to the Silk City Striders