

Last Name _____ First Name _____

Bib Number

#1 – July 11	#2 – July 25	#3 – Aug 8	#4 – Aug. 15	#5 – Aug. 22

Summer Grand Prix Cross Country Race Series 2016

Sponsored by: The Journal Inquirer Wickham Park The Silk City Striders
soundRUNNER Fleet Feet Hartford Marathon Foundation Manchester Running Company Highland Park Market

Dates: Monday Nights – July 11 & 25 and August 8, 15 & 22
(In the event of cancellation the race will be rescheduled for Tuesday.*)

Location: Wickham Park – Meet at the back Parking Lot
(where the State High School Cross Country races finish)
Cancellation Information: 860-649-6426



Time and Distance 6:00 p.m., Boys & Girls - 1 mile for ages 13 and under
6:30 p.m., Men & Women - 2.6 miles for ages 14 and older

Entry fee: \$4.00 (13 & under) \$15.00 Registration for the Series
\$5.00 (14 & over) \$20.00 Registration for the Series

Make checks payable to: MIKE BENDZINSKI

Awards: To be eligible for an award you must run in 4 out of 5 races during the summer.
Trophies will be presented to the top 2 finishers in each age group and medals to any other runner completing the series.

Age Groups*: Boys & Girls - 1 Mile Race - 9 & under, 10-11, 12-13
Men & Women -2.6 Mile Race - 14-15,16-18, 19-29, 30-39, 40-49, 50-59, 60-69, & 70+
*Age is based on age as of July 11, 2016

Name _____ Age* _____ Male Female
(as of 7/11/2016)

Address _____

City _____ State _____ Zip _____

Email Address: _____

Release: In consideration of the acceptance of my entry, I, for myself, my heirs, executors and assigns, waive, release and discharge any and all rights and claims for damages against the meet director, officials, Wickham Park, the Journal Inquirer, and the Silk City Striders for all claims of damages, actions whatsoever in any manner arising or resulting from my participation in these races. I attest and verify that I have full knowledge of the risks involved in this race series, and I assume these risks, and that I am physically fit and sufficiently trained to participate in these races.

Signature _____ Date _____

Parents permission signature if under 18 _____