



The Rockland Road Runners present the
**28th Annual George Wodicka
 Hook Half Marathon & 5K Run**
 Sponsored by
 The Family of Sheldon S. Goldstein
 In Gratitude to United Hospice of Rockland
 Sunday, April 30, 2017



Course: Both events start and finish at Rockland Lake State Park, north parking lot. The 13.1 Mile Half Marathon course is challenging and a portion runs along the scenic Hudson River. 5K Run course is flat and fast around Rockland Lake.

Start Times:	Half Marathon – 8:00AM	5K Run– 8:00AM	Kids Run - 7:30AM
Registration Fees:	RRR members thru April 27th	\$40 for USTAF Certified ½ Marathon*;	\$25 for 5K
	Non-RRR members thru April 27th	\$50 for USTAF Certified ½ Marathon*;	\$35 for 5K
	After April 27 th (including Race Day)	\$60 for USTAF Certified ½ Marathon*;	\$40 for 5K
	Kids Run	\$2.00	

Awards: \$100 to the 1st place male & female ½ marathon finishers. All ½ marathon finishers will receive a medal. 1st, 2nd & 3rd place medals presented to the top three male and female finishers in the half marathon and 5k run for the following age groups: 19 & under, and every five years thereafter.

Raise money for Hospice: Runners are encouraged to raise money to support United Hospice of Rockland. Ask friends, family and neighbors to sponsor your participation. For more information, visit: <https://runsignup.com/race/NY/congers/GeorgeWodickaHookHalf5kRuns> Create/join a team or fundraise as an individual. Contact Sarah Henry at United Hospice of Rockland at 845-634-4974 for additional information.

T- Shirts: Guaranteed to the first 600 on-line registrants. **Limited or no availability of shirts for registrants after on-line registration closes.**

5K Walk: For non-runners, United Hospice of Rockland will be offering a concurrent 5K Walk. For more information, or to register for the UHR Walk to Remember, visit <https://runsignup.com/Race/NY/Congers/UnitedHospiceofRocklandWalktoRemember> or contact Sarah Henry at 845-634-4974.

Pre-Race Packet Pick-up on Thursday, April 27th from 4 -7PM at Dicks Sporting Goods, Palisades Center, West Nyack and at Rockland Lake State Park - North Parking Lot, Saturday April 29th from Noon–3PM.

FIRST NAME: _____ LAST NAME: _____ MALE FEMALE

STREET ADDRESS: _____

TOWN/CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: _____ CELL: _____

E-MAIL _____ @ _____ AGE ON RACE DAY: _____ BIRTH DATE: _____

EVENT (circle one): Half Marathon 5K Run

Make checks payable to: **RRR** and mail to Hook Half Marathon, PO Box 435, Congers, New York 10920
 For on-line registration go to <https://runsignup.com/race/NY/congers/GeorgeWodickaHookHalf5KRuns> For additional info contact race director, Steve Borton at hookhalf@rocklandroadrunners.org or 845-323-2572

I would like to join the Rockland Road Runners. I have enclosed a separate check of \$25 for the 2017 calendar year.

WAIVER MUST BE SIGNED

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in club activities unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete or assist in the event. I assume all risks associated with running and volunteering to work in club races including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat, humidity, extreme cold, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for participation, I for myself and anyone entitled to act on my behalf, hereby waive and release the Road Runners Club of America, the Rockland Road Runners, the Palisades Interstate Park Commission, Town of Clarkstown, County of Rockland, United Hospice of Rockland and Super Race Systems and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I understand that bicycles, baby joggers, roller skates or blades, animals and radio headsets are not allowed in the race and I will abide by this guideline. I also grant permission to the event organizers to use or authorize others to use any photographs, motion pictures, video, recordings, or any other record of my participation in this event or related activities for any legitimate purpose without remuneration. 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. Absolutely no refunds, exchanges, or transfers.

Signature: _____ Date: _____ Parent's Signature (if under the age of 18): _____