

ROCKLAND ROAD RUNNERS PRESENTS THE 20TH ANNUAL



5 MILE TURKEY TROT



for the Marisa Fund

Thanksgiving Day, November 24, 2011 - 8:30 AM

WHERE: Start & finish at Rockland Lake State Park, Congers, NY (north parking lot #1)

COURSE: First 2 miles are rolling hills, last 3 miles are flat (USATF certification # NY03014AM)

RACE DAY SCHEDULE: Race Check-In and Registration - 6:45-8:00AM

Wheelchairs start at 8:15AM - Race Starts at 8:30AM

AWARDS: Top 3 m/f overall, 15 & under, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75+
Top 3 overall Wheelchair Division (pushrim & handcrank)

Long-sleeve TECHNO shirts to all pre-registrants.
SHIRTS ARE NOT AVAILABLE FOR RACE DAY ENTRANTS

FEES: \$25 - General \$20 - RRR members
Senior Special (Age 65+)\$20 (must be pre-registered)
Race Day Fee: \$35

**Ken Shelton
Photography**

Is the official event
photographer for the
2011 Turkey Trot

Find your photos at:
www.kenshelton.com

**PRE-RACE
REGISTRATION
SHIRT and RACE
NUMBER PICKUP**

Mon, Tues. & Wed
Nov. 21, 22 & 23
12 noon - 8 PM

Bravo Restaurant
4th Floor, Palisades Center
opposite the movie complex

QUESTIONS? Call 914-522-3890 or email turkeytrotdirector@rocklandroadrunners.org

ON LINE: Register at www.rocklandroadrunners.org/turkeytrot

RACE RESULTS: Posted Next Day

**Limited Race Day
Registration!**



***Join the Thanksgiving spirit!**

All participants are requested to bring nonperishable food for our annual food drive.

All collected food will be given to "PEOPLE TO PEOPLE" for needy families throughout Rockland County.

HAPPY THANKSGIVING!

FIRST NAME: _____ LAST NAME: _____ MALE FEMALE

STREET ADDRESS: _____

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

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

Entry Amount Enclosed: \$25 \$20 RRR members Membership #: _____ \$20 Senior Special - Age 65+ (must be pre-registered)

I would like to join the Rockland Road Runners. I have enclosed a separate check of \$25 for the 2012 calendar year.
 I/My business/corporation would like to be a sponsor for next year's Turkey Trot. Please contact me.

Make checks payable to: RRR Mail entry form to: Turkey Trot c/o RRR, P.O. Box 435, Congers, New York 10920

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, Bravo Restaurants, the Palisades Interstate Park Commission, Town of Clarkstown, County of Rockland, People to People, Rockland County Policy Hispanic Society, New York State Police, 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.

ABSOLUTELY NO REFUNDS, EXCHANGES, OR TRANSFERS.

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