

# JAN-FEB 2007

**No refunds, changes, or transfers.** One application per registrant. You may photocopy this form if you need additional entry blanks.

FOR OFFICE USE ONLY

## WAIVER:

I know that participating in NYRR events is a potentially hazardous activity. I agree not to enter and participate unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I am voluntarily entering and assume all risks associated with participating in the event, including, but not limited to, falls, contact with other participants, spectators or others, the effect of the weather, including heat and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant to the Medical Director of this event and his designee access to my medical records and physicians, as well as other information, relating to medical care that may be administered to me as a result of my participation in this event. Having read this Waiver and knowing these facts, and in consideration of your acceptance of this application, I, for myself and anyone entitled to act on my behalf, waive and release New York Road Runners Club, Inc., Road Runners Club of America, USA Track & Field, the City of New York and its agencies and departments, the Metropolitan Athletics Congress, and all sponsors, and their representatives and successors, from present and future claims and liabilities of any kind, known or unknown, arising out of my participation in this event or related activities, even though such claim or liability may arise out of negligence or fault on the part of any of the foregoing persons or entities. 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.

NYRR Membership No.	Chip No. (owners only)	E-mail Address	
Last Name (ONLY ONE PERSON PER FORM)		First Name	
Race Day Age	Birth Date (month/day/year)	Sex	Day Phone
Mailing Address	PLACE MAILING LABEL HERE		
City	State (or country if not USA)	Zip Code	
Exact Name of Team			

Check if using a wheelchair

X \_\_\_\_\_  
Signature (or parent's signature if under 18)

Check here to enter	Date	Event Name	Fee	NYRR Members	NYRR Junior/Senior Members	All Non-Members
<input type="checkbox"/>	<b>Sunday, Jan. 7</b> 9:30 a.m.	NYRR Fred Lebow Classic (5M) (s) (q)	On or before December 24 December 25-January 6 Race Day <sup>2</sup>	\$11 \$11 \$25 <sup>3</sup>	\$7 \$7 \$15 <sup>3</sup>	\$20 \$25 \$35
<input type="checkbox"/>	<b>Sunday, Jan. 21</b> 8:30 a.m.	NYRR Half-Marathon Grand Prix: Manhattan <sup>1</sup> (s) (q)	On or before January 7 January 8-20 Race Day <sup>2</sup>	\$11 \$17 \$25 <sup>3</sup>	\$7 \$13 \$15 <sup>3</sup>	\$20 \$25 \$35
<input type="checkbox"/>	<b>Sunday, Feb. 4</b> 9:00 a.m. (Football throw competition is at 8:15 a.m.)	NYRR Gridiron Classic (4M) (s) (q)	On or before January 21 January 22-February 3 Race Day <sup>2</sup>	\$11 \$17 \$25 <sup>3</sup>	\$7 \$13 \$15 <sup>3</sup>	\$20 \$25 \$35
<input type="checkbox"/>	<b>Sunday, Feb. 11</b> 8:00 a.m.	NYRR Half-Marathon Grand Prix: Bronx <sup>1</sup> (s) (q)	On or before January 28 January 29-February 10 Race Day <sup>2</sup>	\$11 \$17 \$25 <sup>3</sup>	\$7 \$13 \$15 <sup>3</sup>	\$20 \$25 \$35
<input type="checkbox"/>	<b>Saturday, Feb. 24<sup>1</sup></b> 8:30 a.m. (men only)	NYRR Al Gordon Snowflake 4-Mile (s) (q)	On or before February 10 February 11-23	\$11 \$17	\$7 \$13	\$20 \$25
<input type="checkbox"/>	9:30 a.m. (women only)		Race Day <sup>2</sup>	\$25 <sup>3</sup>	\$15 <sup>3</sup>	\$35

**Note: Please confirm race details including start times by calling 212.860.4455 or checking www.nyrr.org.**

(s) Scored race.

(q) Counts toward the nine races NYRR members need to qualify for guaranteed entry to the ING New York City Marathon 2006.

(n) Entrants with permanent running numbers will receive a special running number for this race.

<sup>1</sup>Participants must be 12 years of age or older for NYRR events that are 10K and longer.

<sup>2</sup>Credit cards are not accepted after Number Pick-up begins.

<sup>3</sup>Members must bring their NYRR membership card on race day to receive member discount.

<sup>4</sup>Only one application per participant, please.

**Total Race Payment \$ \_\_\_\_\_**

### JOIN NEW YORK ROAD RUNNERS

New York Road Runners membership provides you with valuable benefits and savings.

- I want to join for a yearly membership fee of only \$35\* (\$40 starting January 2007)  
 I want to renew my yearly membership now for only \$35\* (\$40 starting January 2007)

I was referred by \_\_\_\_\_  
(current NYRR member name and number)

\*Membership fees vary for families and juniors/seniors and special package deals. Please consult a New York Road Runners membership application or visit [www.nyrr.org/membership](http://www.nyrr.org/membership).

**Membership Payment \$ \_\_\_\_\_**

### TO APPLY ONLINE\*\* (credit card payments only) [www.nyrr.org](http://www.nyrr.org)

\*\*Fax and online registration for each race will close the Wednesday prior to race at 5:00 p.m.

### TO APPLY BY MAIL

Complete this form and mail this entry and your payment (check or credit card information) to:

Jan.-Feb. Race Entries, New York Road Runners, 9 East 89th Street, New York, NY 10128.

### TO APPLY BY FAX\*\* (credit card payments only)

Complete this form with your credit card information and fax it to New York Road Runners at 212.369.4704 or 212.831.1950. Please do not call to confirm receipt of fax.

Entries received after that date will not be processed. No exceptions.

**TOTAL PAYMENT \$ \_\_\_\_\_**

Enclosed is my check payable to NYRR. *Improperly written checks will be returned.*

PLEASE CHARGE MY:  MASTERCARD  VISA  AMERICAN EXPRESS

Credit Card #

Expiration Date (must be March 2007 or later)   
month year

Cardholder Must Sign Here X \_\_\_\_\_

*Note that there will be no confirmation of your acceptance. Your canceled check or credit card statement is your receipt.*