

10th ANNUAL CLARKS ON 5K RUN/WALK
“The Clarkson Swift Comet 5K—Shoot for the Stars”

(Honoring noted Clarkson Astronomer Lewis A. Swift)

To Benefit the Clarkson Historical Society

CHIP TIMING by PCR TIMING SERVICES

HAFNER PARK, LAKE ROAD, ROUTE 19, CLARKSON

(1/4 Mile North of Ridge Road, Route 104)

Saturday, August 25, 2018

Race Start Time: 8:30 AM

RACE DAY REGISTRATION 7:00 AM – 8:00 AM

FREE WICKING TECH T-SHIRTS TO FIRST 150 ENTRANTS

PRIZES TO TOP 3 IN AGE/GENDER GROUP and OVERALL

REGISTER INFO:

1. **MAIL:** Clarkson Historical Society, P.O. BOX 600, Clarkson, NY 14430 or
2. **DROP OFF:** Clarkson Town Hall, 3710 Lake Rd., Clarkson, NY or
3. **ON-LINE:** Coming Soon

PRE-RACE PACKET PICK-UP: AUG. 19 10:00-12:00 and 4:00-6:00

At the Clarkson Historical Society Academy 8343 W Ridge Rd. Clarkson (Just East of Rt. 19)

Info. Contact: Christopher Albrecht (H) 585-637-3885, or clarksonrunner@hotmail.com

Please detach and return

ENTRY FORM

Be a Winner! — PLEASE PRINT CLEARLY

MUST BE POSTMARKED BY AUG. 16 FOR REDUCED RATE

ADULT: (20 and older on Aug 20) () \$20.00 by Aug. 16. () \$25.00 after Aug 16 or on day of race.

STUDENT: (19 and under on Aug 20) () \$16.00 by Aug. 16. () \$20.00 after Aug 16 or on day of race.

(Please make check payable to Clarkson Historical Society)

First Name: _____ **Last Name:** _____

Email: _____ @ _____

Address: _____

City: _____ **State:** _____ **ZIP** _____

PHONE: _____ **AGE on race day** _____ **Gender: M F** **T-Shirt: S M L XL**

STUDENT'S SCHOOL & TEAM: _____

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, 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, I, for myself and anyone entitled to act on my behalf, waive and release the Town of Clarkson, New York, The Clarkson Historical Society, all sponsors, their representatives and successors from all claims of liabilities of any kind, including any claims arising out of negligence of the aforementioned parties, arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

Signature _____

Parent Signature _____
(Parent must sign if entrant is under 18 years old)