

ATTENTION FIRE DEPARTMENTS !
ST. PATRICK'S 4 Mile RUN
INAUGURAL FIREFIGHTER CHALLENGE

Saturday, March 9, 2013

Start/Finish is at American Legion Post #360
North end of Rte. 110 at Mill Dam Road, Halesite

For the first time, the TOWNWIDE FUND OF HUNTINGTON'S St. Patrick's Run will feature a Firefighters Team Challenge. Teams of 5 (five) runners may be entered in the 4 Mile race, with the top finishers from each department, male and female, competing for awards and bragging rights.

Teams will be scored as in Cross Country - low total wins.

We make this available at a special fee of \$15.00 (fifteen dollars) per runner BUT, in hand after 3/1 will be \$20.00. Early entries will receive a St. Pat's Run tee shirt, - hurry because quantities are limited.

Further info: Townwidefund.org or ~ (631) 271-3349

EACH INDIVIDUAL must submit a fully completed entry form **with the required signatures**. Make as many copies as you wish. Make your TEAM entry on the form below.

You make your final declaration of team members on the race morning.

It's for a good cause too; actually, 20 good causes. The Townwide Fund of Huntington helps support 20 member agencies! **Note**, you DON'T need to get pledges or sponsors !

FIREFIGHTER TEAM Entry Form

Department : _____

Group name: _____ Team: ___ Male ___ Female

Make final nominations on race day ~ Please list names AND run numbers.

Names - Team "A"	Race #	Names - Team "A"	Race #
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	

ST. PATRICK'S RUN INDIVIDUAL ENTRY FORM

Mail to: **SUPER RUNNERS SHOP- 355 New York Ave., Huntington, NY 11743**

Forms available at: SUPER RUNNERS SHOP - 355 New York Ave., Huntington, NY 549-3006

I, the undersigned, hereby waive and release any and all rights and claims I may have against The Townwide Fund of Huntington, Inc., the Town of Huntington, the host facility, USATF-LI and the sponsors for damages which I may have arising out of said event. I am Physically fit and have trained for this race. The applicant warrants that "my physical condition has been verified by a licensed medical doctor." "Further, I hereby grant full permission to any and all of the foregoing to use any pictures, or any other record of this event for any purpose whatsoever."

If signed by a parent, that parent agrees to release and hold the above named organizations and persons harmless of any claims which may be asserted by or on behalf of the entrant.

Please Print 4 Mi FD Challenge MALE FEMALE
Name _____ Department _____
Address _____ Date of Birth ___/___/___ Race Day Age ___
Town _____ STATE _____ ZIP _____
Fee _____ Phone (____) _____ Email _____
Signature, **All entrants must sign** _____
Parent must sign if runner is under 18 years of age _____

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