



START TIMES:
5K Challenge Run/Walk
 9:30am
Kids Competitive 1 Mile
 10:15am
Kids 1/4 Mile Fun Run
 10:15am



FUN FOR ALL! MUSIC, FOOD, KIDS ZONE, AWARDS!

5K CHALLENGE RUN/WALK

- All races begin and end behind the Rudy A. Ciccotti Center
- FREE long sleeve dri-fit shirt to participants registered by 9/2/19
- Chrono Track B-Tag timing provided by ARE Event Productions
- 5K run/walk is a fairly flat and fast course through the Crossings Park
- Strollers for registered walkers only
- Awards - Overall Top 3 and 5 year age group awards from under 15 to 80+, male and female, no repeats
- Early registration \$25 at www.zippyreg.com
- Electronic start mat!

COMPETITIVE KIDS 1 MILE RUN

- * \$10 registration competitive run for ages 13 and under
- * Short sleeve cotton t-shirt while supplies last
- * Chrono Track B-Tag timing provided by ARE Event Productions
- * Awards - 1st, 2nd and 3rd overall for boys and girls

KIDS FUN RUN

- * Free for children ages 13 and under; each child must be registered
- * All participants receive a medal
- * Optional - cotton t-shirt with \$10 donation, while supplies last

REGISTER ONLINE AT ZIPPYREG.COM! Entries may also be dropped off at the Ciccotti Center at 30 Aviation Road Colonie or mailed to Colonie Youth Center, Inc. 15 Avis Drive, Latham, NY 12110. (One entry form per person. Entry fees are non-refundable.)

CROSSINGS 5K CHALLENGE PARTICIPANT

_____ 5K Runner _____ 5K Walker

\$25 Early Registration \$30 after 12pm on Wednesday, 9/25/19

Free dri-fit shirt guaranteed to participants registered by 9/2/19

Adult shirt size (Circle size preference) S M L XL XXL

KIDS COMPETITIVE 1 MILE PARTICIPANT

\$10 through race day, includes cotton t-shirt, while supplies last

Shirt Size (Circle size preference) YS YM YL AS AM AL

KIDS FUN RUN - - FREE!

_____ Optional - cotton t-shirt with \$10 donation, while supplies last

PARTICIPANT — One entry per registration form. Confirmations will be sent via e-mail.

How did you hear about this event? _____

First Name _____ Last Name _____ Company _____

Mailing Address _____ City _____ State _____ Zip _____

E-mail Address _____ Phone _____

DOB (REQUIRED) ____/____/____ Age on race day _____ Male / Female (Circle)

PAYMENT INFORMATION

- Check enclosed. Please make check payable to CYC.
- Credit Card Name on Card _____ CVV Code _____
 Credit Card Number _____ Exp. Date _____

READ BEFORE SIGNING

In consideration of my entry to this race/event, I hereby release and waive any and all claims for injury/damages against the Colonie Youth Center, ARE Event Productions and any and all sponsors and their representatives and any official or participant for any injuries I may suffer in conjunction with this race/event. I also certify that I am in good physical condition and have trained for this race. Further, I hereby grant all permission to any and all the forgoing to use any photographs, video tapes, motion pictures, recordings or any other record for this event for any purpose.

Signature _____ Date _____ Emergency Contact _____

Signature _____ Date _____ Emergency Phone # _____
 (Of parent/guardian if participant is under 18)