



**4-MILE RUN  
FEBRUARY 2, 2008  
SATURDAY, 10:00 AM**



**POLAR CAP  
ADIRONDACK RUNNERS**

**\*\*\*FIRST GRAND PRIX RACE OF THE YEAR\*\*\***

**REGISTRATION:** 8:00 - 9:30 A.M. AT LAKE GEORGE ELEMENTARY SCHOOL,  
& **PACKET PICKUP** SUN VALLEY RD., (EXIT 21 OFF I87 TO ROUTE 9 NORTH, RIGHT  
ON 9L, GO ½ MILE TAKE RIGHT ON SUN VALLEY RD.)

**ENTRY FEES:** \$15.00 (\$13.00 FOR ADIRONDACK RUNNERS) - RACE DAY \$20.00 ALL  
FAMILY DISCOUNT (3 OR MORE) LESS \$1.00 PER RUNNER

**RACE INFORMATION:** PHONE: JOANNE LALONDE - (518) 796-9093  
WEB ADDRESS AT: [WWW.ADIRONDACKRUNNERS.COM](http://WWW.ADIRONDACKRUNNERS.COM)

**APPAREL:** POLAR CAP LONG SLEEVE T-SHIRTS TO THE FIRST 200 REGISTERED

**FACILITIES:** HOT REFRESHMENTS  
LOTS OF PARKING, WATER STATIONS AND SPLIT TIMES.

**ACCOMMODATIONS:** LAKE GEORGE CHAMBER OF COMMERCE - PHONE (518) 668-5755

**TO BENEFIT:** THE ADIRONDACK RUNNERS SCHOLARSHIP FUND

**AWARDS!**

**OVERALL - M&F**  
1<sup>st</sup> thru 3<sup>rd</sup>

**ELEVEN AGE GROUPS - M&F**  
1<sup>st</sup> thru 3<sup>rd</sup>

**WALKERS OVERALL**  
1<sup>st</sup> thru 3<sup>rd</sup>

**NO DUPLICATES**

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-Detach Here-

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Runner or Walker (R/W): \_\_\_\_\_

Birthdate (MM/DD/YYYY): \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Sex (M/F): \_\_\_\_\_ T-Shirt Size (M, L, XL): \_\_\_\_\_

Volunteers needed race day Circle if you (or someone you know) can: Race Day Registration Packet Pickup Safety Finish Line Cleanup Other: \_\_\_\_\_

I know that participating in The Adirondack Runners 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 sub-zero temperatures, snow & ice, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant to the Adirondack Runners its 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 The Adirondack Runners, Road Runners Club of America, the Village of Lake George, Town of Lake George, Lake George School District, and their agencies and departments, 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. \*\*\* NO DOGS ARE ALLOWED ON THE COURSE FOR SAFETY REASONS \*\*\*

SIGNATURE \_\_\_\_\_

SIGNATURE OF PARENT (if under 18) \_\_\_\_\_

Make Checks Payable To: THE ADIRONDACK RUNNERS

MAIL ENTRIES: Joanne LaLonde 1136 Pattens Mills Road Queensbury, NY 12804

Official Use Area

Date Rec. \_\_\_\_\_

Race # \_\_\_\_\_