32nd Freihofer's Run for Women

June 5, 2010
***Start Time* – 10:15 a.m.**

OFFICIAL ENTRY FORM

Entry Fee - $35

Register online at
www.freihofersrun.com
and save up to 42%.

ENTRY FEES ARE NOT REFUNDABLE.

**DO NOT mail this form after Friday, 5/28.*
In-person registration (last chance) will take place Friday, 6/4, noon - 8 p.m.

Additional 5 km t-shirts will be sold at last chance registration for $12.

Team Entry Form

2010 FREIHOFER'S RUN FOR WOMEN 5 km **Each participant can only register as part of one team per category.**

Mail to: Freihofer's Run For Women, PO Box 1200, Troy, NY 12181 • *Note: All team members must be individually registered. Please send all entries of Team Members together in one envelope.*

Team Categories

❑ **Mother/Daughter Team**
Name 1 _____
Name 2 _____

❑ **Sister/Sister Team**
Name 1 _____
Name 2 _____

❑ **USATF Club Team – 5 Runners/Top 3 Score** *Each team member must have a 2010 USATF membership stating that she is a member of the 2010 USATF Club for which she is competing at this event.*

❑ **Corporate Team – 5 Runners/Top 3 Score**

❑ **High School Team – 5 Runners/Top 3 Score**

❑ **Family & Friends – 5 Runners/Top 3 Score**

Team Contact _____
(Name)
_____
(Address)
_____
(City) (State) (Zip)

Team Name: _____

Contact's Phone No.: _____

Club Number: _____

Signature: _____

Individual Entry Form

2010 FREIHOFER'S RUN FOR WOMEN 5 km

Last Name **First Name**

Mailing Address

City **State** **Zip**

U.S. Citizen? ❑Yes ❑No

Country

Phone Number (Daytime)

USATF Number - visit www.usatf.org to purchase membership *(For USATF Club Team members only.)*

Date of Birth **Mo.** **Day** **Yr.**

Age on 6/5/10

E-mail

T-Shirt Size* *(*Not guaranteed.)*
❑S ❑M ❑L ❑XL

RELEASE: *In consideration of the acceptance of my entry, I, on behalf of myself, my heirs, executors, administrators and assignees, hereby release myself and discharge: the Charles Freihofer Baking Company, Inc., State of New York Office of General Services, Albany County, the City of Albany, the Board of Athletics, Adirondack Association Inc., and USA Track & Field and all other sponsors or beneficiaries and their representatives, successors and assignees from any and all claims for damages and causes of action arising from or out of my participation in the Freihofer's Run For Women. I attest that I am physically fit and that my condition has been verified by a physician. I am aware that the medical support for this event will be volunteer medical personnel who will be prepared to administer first aid only. I hereby grant permission to the Charles Freihofer Baking Co., Inc. and any other sponsors of this event to use all information submitted in this application, and any record of this race containing my likeness, as well as race results including my name and competition time, for any purpose whatsoever, including, but not limited to, pre-race publicity. I hereby certify that I have read all terms and conditions of this release and intend to be legally bound thereby.*

Signature of participant _____ *Date* _____

Signature of guardian if under 18 _____ *Date* _____

Incomplete or Unsigned Entries Will Not Be Accepted. ENTRY FEES ARE NON-REFUNDABLE.

Make Checks Payable to: **USATF – AA** *and mail to Freihofer's Run For Women, PO Box 1200, Troy, NY 12181, (518) 273-5552 • Fax: 273-0647 • e-mail: runninginfo@freihofersrun.com*