# 39th ANNUAL DOC LOPEZ RUN FOR HEALTH REGISTRATION FORM

BENEFIT: University of Vermont Health Network Elizabethtown Community Hospital

**Date/Time:** Saturday March 23, 2019. 13.1 mile starts at 9:00, 1 mile starts at 10:00, 3.1 mile starts at 1030. All participants receive a medal and gift. This is a family friendly event, but no pets!

**Start/Finish:** The 13.1 mile run starts at the Keene Valley Lodge, 1834 NYS Route 73, Keene Valley. It follows Route 73 to Route 9N to Elizabethtown-Lewis Central School (ELCS), Elizabethtown, NY. The 3.1 mile run and 1 mile walk start at ELCS, head south on Route 9 then turn to head north on Route 9. All events finish at ELCS.

**Registration:** Pre-registration on doclopezrun.com and Friday March 12 from 4:00 pm to 7:00 pm at ELCS. Registration is also available the day of event at ELCS from 8:00 to 8:30 for the 13.1 mile, 8:30 to 9:45 for 3 mile and 1 mile.

**Transportation:** Parking is available at ELCS. The bus for the 13.1 mile leaves ELCS at 8:30 for an 8:50 arrival in Keene Valley. Parking is available in Keene Valley, but no registration pre-event or transportation after event.

**Contact**: For further information: 518-637-7102 or susieallott@gmail.com

**Entry Fee:**

| event | Receipt before 3/8/18 | Family cap*** (#5) receipt before 3/8/16 | Receipt 3/9 – 3/22 | Day of event (3/23/16) |
|---|---|---|---|---|
| 1 mile walk | $15 | $60 | $20 | $25 |
| 3.1 mile | $25 | $80 | $30 | $35 |
| 13.1 mile | $40 | N/A | $50 | $60 |

**** Family Cap entry fee includes two generations (Parents & Children/Step-Children) ****

**Waiver**: I know that running a road race is a potentially hazardous activity, and I assume all the risks associated with running this event. In consideration of your acceptance of my entry, I, the undersigned, intending to be legally bound, for myself and anyone entitled to act on my behalf, waive and release the town of Keene, town of Elizabethtown, the University of Vermont Health Network Elizabethtown Community Hospital, the Elizabethtown-Lewis Central School District, the Keene Valley Lodge, all sponsors race officials and volunteers, their representatives and successors, from all claims and liabilities of any kind arising out of my participation in this event. I am physically fit and have trained for this race.

NAME:_____ ADDRESS:_____

CITY:_____STATE:_____ZIP:_____PHONE:_____

EMER. PHONE_____ EMAIL: _____ DATE: _____

EVENT : ____ 1MILE ____5K ____13.1 ___Male ___Female Age: (As of 3/19/16):____

SIGNATURE:_____GUARDIAN/PARENT (UNDER 18):_____

Staff use only: Paid____ Cash_____ Check #_____ Amount_____ Bib #_____