

HOLLY JOLLY 5K

Dec 3, 2016 | Orchard Park, NY | 12pm
POST RACE PARTY @ THE BYRD HOUSE !!



Packet Pickup times:

NEW - FRIDAY DEC 2ND 4:30-6:00 PM ROBERT BASIL GMC,
BUICK, CADILLAC 3475 Southwestern Blvd Orchard Park
SAT DEC. 3rd 9:30-11:45 AM
Runner's Roost 4190 N. Buffalo Rd



Join us for the most wonderful time of the year, as runners head up and down Old Taylor Road, and through the surrounding neighborhood. Race starts at 12pm at The Orchard Fresh Plaza parking lot on N. Buffalo Road. Race will finish at Runner's Roost on N Buffalo Road. Course will be 75% closed to vehicular traffic.

**Event is sanctioned by USATF
Certification # NY 12143JG**

\$20 Early Reg (until 10/17) | \$25 Late Reg (until 11/30) | \$30 Race Week Reg (12/1-12/6)

Last Name _____ **First Name** _____

E-mail Address _____

Shirt Size (circle one) S M L XL XXL **Race Day Age** _____ **Gender** (circle one) M F

In consideration of you accepting my entry and permitting me to attend or permitting me to participate therein, I intend to be legally bound hereby for myself, my heirs, executors or administrators, waive and release all rights and claims for damages I may now or in the future have against Eclipse Multi-Sport, their representative(s), Venue, Volunteers, Village of Orchard Park, Town of Orchard Park, Agents, Sponsors, Members or Vendors for any and all losses and injuries suffered from competing in, or attending said event. I give my permission to publish in a newspaper or any mass media, any photographs, slides or videotape in which I appear while participating in any Eclipse Multi-Sport activity. I understand that walking or running in a road race is potentially hazardous activity. I should not participate unless I am medically able and properly trained. I also understand that my entry fee is nonrefundable. A parent must sign if an entrant is under 18 years of age. This is to certify that my child had permission to compete in the events, are in good physical condition, and the event officials may authorize necessary medical treatment. By signing below I agree to these terms.

Signature _____ **Date** _____

If under 18, signature of a parent or guardian is **REQUIRED**

Parent/Guardian Signature _____ **Date** _____

Visit eclipsemultisport.com | Questions: anne@eclipsemultisport.com

Make checks payable and send to:

BROUGHT TO YOU BY !!!

Eclipse Multi-Sport
5859 Woodlee Court
Orchard Park, NY 14127

