2019 LAST RUN 5K ENTRY FORM

Name				
Address				
Phone (Day)	_ Phone (Evening)			
E-mail				
I would like an e-mail cont	firmation of receipt and payment.			
Male Female Date of Birth _	Age (DAY OF RACE)			
have against the City of Albany, and any and all sp participant for any injuries I may suffer in conjunction condition and have trained for this race. Further, I h	elease and waive any and all claims for damages I may onsors and their representatives and any official or on with this race. I also certify that I am in good physical hereby grant all permission to any and all the foregoing to recordings or any other record of this event for any purpose.			
	eg.com by Dec. 4. All entry fees are final and non-refundable. re not permitted. The City of Albany reserves the right to cancel			

Bib Du the race due to weather conditions that cause the running surface to be hazardous to the runners' safety. In the event of cancellation, no refunds will be issued.

Signature	
Print Name	Date

Signature	of Parent/L	.egal Guardian	(If Under 18)
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Registration Fee: check one

\$25 before Nov. 1

- \$30 on or after Nov. 1
- \$35 on or after Dec. 1

Registration Questions?

Contact Ryan Murray Ph: 518.434.5415 E-mail: rmurray@albanyny.gov Shirt Size: sizes guaranteed before Nov. 1 S XL XXI Μ L

Packet pickup: Wed., Dec. 4, 4-7pm at Albany Running Exchange Office (21A Railroad Ave, Albany) Thurs., Dec. 5, 7-9am & 4-7pm at ARE Office Friday, Dec. 6, 11am-6pm at Albany City Hall (24 Eagle St) Day of race, 2-4:30pm: Base of the Egg, Empire State Plaza (enter at Vietnam Memorial on State St)

Mail this ENTRY FORM with check payable to City of Albany:

City of Albany Office of Special Events & Cultural Affairs Attn: 5K Coordinator **City Hall Room 402** Albany, NY 12207

For more information, call 518.434.2032, visit www.albanyevents.org or follow albanyNYevents on Facebook, Instagram & Twitter!