

BLAZING TRAILS

for Autism



4 MILE RUN/WALK FOR AUTISM

RAISE FUNDS & AWARENESS FOR A GREAT CAUSE

& 1.5 MILE WALK

JOIN TEAM GENESIS IN THE BLAZING TRAILS 4 MILE RUN/WALK FOR AUTISM

11.19.16

SATURDAY, NOVEMBER 19TH @ 9AM

USATF SANCTIONED EVENT
GREAT NECK SOUTH HS

VISIT US ONLINE AT EDEN2.ORG/RUN

ENTRY FEES

4 MILE RUN/WALK & 1.5 MILE WALK

Pre-registered (through October 23) \$25
Pre-registered GLIRC members \$22
All day-of-race entries \$30

To register by mail, please send completed and signed entry form, with check payable to "GLIRC" to:

GREATER LONG ISLAND RUNNING CLUB

Attn: Blazing Trails 4 Mile Run/Walk For Autism
101 Dupont Street, Suite 24 Plainview, NY 11803

Register on-line at www.GLIRC.org

Online registration closes 5:00PM Thursday, November 17

RACE GIVEAWAYS

Every entrant will receive a unique hooded sweatshirt! **OUR BEST EVER - YOU'LL LOVE IT!**



• The Haley Family •

Genesis PTO • Joan & Fitz Read

• CBSR Citrus Distributors of Tropicana •



THE COURSE

Four challenging but fair miles on the rolling hills and scenic vistas of the beautiful Great Neck South Campus and nearby areas of Lake Success.

PACKET PICKUP

Great Neck South High School,
Saturday, November 19 from 7:15AM to 8:45AM.
The Run/Walk will start PROMPTLY at 9:00AM!

GIANT RAFFLE!

Lots of terrific prizes, including a **Road Bike with helmet and accessories** Valued at more than \$1,000! — Donated by BrickWell

YOU MUST BE PRESENT AT THE RAFFLE PRIZE DRAWING TO BE ELIGIBLE TO WIN!

Musical Entertainment throughout the morning

AWARDS

- Top Male and Female finisher overall
- Top Male and Female Masters (age 40+) finisher
- Top three Male and Female finishers in each of the following Age Groups: 12 & under, 13-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85 & over
- Top three Clydesdale Men 185-199 lbs., 200 lbs.+
- Top three Athena Women 140-159 lbs., 160 lbs.+
- Top three Wheelchair finishers

DIRECTIONS

Take Long Island Expressway to Exit 33 (Lakeville Road). Take Lakeville Road South about 1/4 mile and make a left turn into Great Neck South Schools campus, bearing left towards the High School.

RACE ADMINISTRATION

Greater Long Island Running Club
Timing and Scoring by **Just Finish, Inc.**
Using the RFID computerized timing system
Logistic Support from
Great Neck School District

Blazing Trails 4 Mile Run/Walk For Autism • November 19, 2016

Make checks payable to "GLIRC" and mail to: GLIRC, 101 Dupont Street, Suite 24, Plainview NY 11803
Register online at www.glirc.org. Online registration closes Thursday, November 17th at 5:00 PM

First Name _____ Last Name _____

Address _____ Town _____ State _____ Zip _____

Phone (____) _____ Email _____

1.5 MILE WALK 4 MILE RUN • Male Female • GLIRC Member • Date of Birth ____/____/____ Age on Race Day _____

Wheelchair • Clydesdale: Male 185-199 lbs. Clydesdale: Male 200+ lbs. • Athena: Female 140-159 lbs. Athena: Female 160+ lbs.

Additional contribution to help individuals with autism \$ _____ Thank You!

PLEASE COMPLETE THIS ENTRY FORM, READ THE FOLLOWING STATEMENT, AND SIGN WHERE INDICATED: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, do hereby for myself, and for my heirs, executors, administrators and assigns, hereby waive, release, and hold harmless THE GREAT NECK UNION FREE SCHOOL DISTRICT, THE GREATER LONG ISLAND RUNNING CLUB, NASSAU COUNTY, VILLAGE OF LAKE SUCCESS, THE EDEN II SCHOOL FOR AUTISTIC CHILDREN, INC., JUST FINISH, INC., all race sponsors, and their representatives, agents, employees, successors and assigns, from any and all liabilities, claims, demands and causes of action of any kind, whether or not arising in whole or in part out of the fault or negligence of any of the abovementioned organizations or individuals. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event, and that my physical condition has been verified by a licensed Medical Doctor or doctor of Osteopathic Medicine. If signed by a parent, the parent agrees to waive, release and hold the above organizations and individuals harmless of and from any claims and rights which otherwise might have been asserted on behalf of the entrant. Further, I hereby grant permission for the Greater Long Island Running Club to use photographs, videos, motion pictures, recording, and any other record of this event for any purpose whatsoever.

Signature _____ Date _____

If under 18 years old, signature of parent or guardian _____ Date _____