

Official Entry Form

Register Online at

www.usatf.org/events/2006/USAMasters5kmXCChampionships/
or

By mail to USATF Adirondack, PO Box 1200, Troy, NY 12181



Sunday – October 15, 2006
Saratoga Spa State Park
Saratoga Springs
New York

USATF Adirondack
PO Box 1200
Troy, NY 12181

(518) 273-5552
www.usatfadir.org
info@usatfadir.org

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

2006USATF#:

2006 USATF Membership Number is Required and is subject to verification.*

EMAIL: _____

PHONE: _____ SEX: _____

AGE ON DAY OF RACE: _____ DOB: _____

US Citizen? (please circle one) YES NO

ARE YOU A MEMBER OF A TEAM: YES NO

If yes please see team entry form

AMOUNT ENCLOSED:

Entry Fee (non refundable)..... \$ 25

Registrant Race Shirt(\$15)..... S M L XL \$

Additional Shirt(\$20)..... S M L XL \$

PAYMENT OPTIONS: **Total Enclosed:** \$

Make checks payable to: USATF Adirondack

Credit Card**: DISCOVERCARD MASTERCARD VISA

Card Number: _____

Expiration Date: _____

Name on Card: _____

Card Holder Signature:

Release: In consideration of my accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, or anyone entitled to act on my behalf, want and release any and all rights and claims for damages that I may have against USA Track & Field, USATF Adirondack Association, Saratoga Spa State Park, The Saratoga National Bank, City of Saratoga Springs, any officials or promoters of this race, all sponsors, volunteers, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and have trained for the completion of this race.

SIGNATURE

DATE

*If you are not a 2006 USATF member, please visit www.usatf.org/membership/ to register for or renew membership

**We do not accept American Express