



The 2011 Summer Trail Series



In Memory of our Coach & Mentor Joe Keller



Kingston Summer X-Country Series



Irish Culture Center
Hudson Valley

Ulster County C.Y.O.

START TIME: Rain or Shine

CHECK IN: 6:00 PM-6:45 PM **Kids Race:** 6:45 PM 14 & under **Race:** 7:00 PM

Race #1	July 6 th	Twin Lakes – 198 Walton Lane Hurley, N.Y. 12443
Race #2	July 13 th	John A. Coleman Catholic High School - 430 Hurley Avenue Hurley, N.Y. 12443
Race #3	July 20 th	Hurley Rail Trail - Route 209 South Hurley, N.Y. 12443
Race #4	July 27 th	Williams Lake - Binnewater Road Rosendale, N.Y. 12472
Race #5	August 3 rd	Williams Lake - Binnewater Road Rosendale, N.Y. 124721
Race #6	August 10 th	Twin Lakes – 198 Walton Lane Hurley, N.Y. 12443

DISTANCE GRADUATING WEEKLY FROM 3 TO 5 MILES

Entry Fee: **\$5.00 Youth 14 years of age & under Includes ALL Races**
\$15.00 All Others Includes ALL Races

Supported By:	Irish Culture Center Hudson Valley, and Ulster County C.Y.O.
Race Director:	Bob Carey 845-331-8992 rcarey@careyconst.com
C.Y.O. Director:	Tom Kelly 845-340-9170 X-4 thomas.Kelly@archny.org

Name: First Last

Address: # St., City, State, Zip

Gender:

Female:

Male:

Age:

E-mail:

Authorization to Participate:

Print Name of Participant:

I hereby give my consent for my child or myself to participate in the Kingston Summer X-Country Series. I understand that there is a risk of injury to my child or myself as a participant in the Kingston Summer X-Country Series, and I hereby assume the risk of my child's or my participation in such activity. In consideration of myself or my child's acceptance in the Kingston Summer X-Country Series, and to the extent permitted by law, I hereby agree to release and hold harmless Twin Lakes, Binnewater Realty Corp., Ulster County Construction Corp., Hudson River Valley Resorts LLC, Williams Lake, John A. Coleman Catholic High School, the Catholic Youth Organization, its parents and affiliates, and their respective trustees, directors, officers, employees, servants, and volunteers from any and all responsibility, liability, claims, and/or demands arising out of my or my child's participation, specifically including any injury that may occur due to their negligence. In the event that I cannot be reached in an emergency, I give permission to the physician selected by the Race Officials to secure and administer treatment, including hospitalization, for all of the above named persons. I also understand and agree to abide by any restrictions placed on my or my child's participation in the Kingston Summer X-Country Series activities, and that I and/or my child will be dismissed from the program if we fail to abide by the program rules.

Print Name of Applicant or
Parent/Guardian if under 18

Signature of Applicant or
Parent/Guardian if under 18

Date: