

Hand in Hand

Super 5K Run/Walk Over the HUDSON

Proceeds to Benefit The Panichi Family Center for Communications and Learning at Saint Francis Hospital

First event of its kind!!

DATE: Sunday, April 17, 2011

**Super 5K Race registration begins at 10:00 AM - Race at 10:30 AM
Walk Registration at 11:30 AM
Walk begins at Noon**

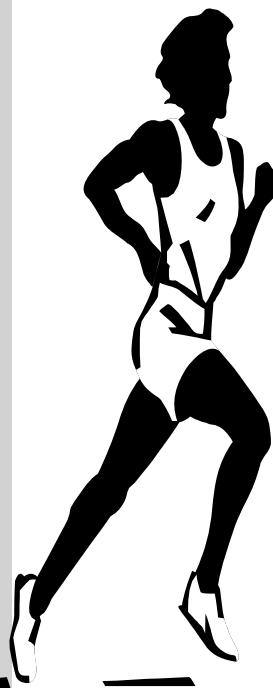
Pre-register by : April 8, 2011

Entry fees:

- \$20.00 for pre-registered runners
- \$10.00 for pre-registered walkers
- \$25.00 for race day registration
- Free for children under 5 - \$30 Family Plan

LOCATION:

The race will begin on the Highland side of the Hudson Valley Rail Trail. It will proceed over the Walkway, through the city of Poughkeepsie, over the Mid-Hudson bridge and finish at the rail trail start/finish line. The walk, will begin at the rail trail and proceed over the Walkway, turn around and end at the start/finish. Go to the Walkway website for suggestions on parking: www.walkway.org. Registration tables will located in the Highland Rail Trail caboose parking area closest to the walkway entrance.



Awards — Top three male and female in these divisions:

(Under 18), (19-29), (30-39)
(40-49), (50-59), (60-69),
(70+) - **Cash** prize to first placed male and female

Sponsored by:

MAPLEBROOK SCHOOL for



**Saint Francis
Hospital and Health Centers**
www.sfhhc.org

For more information or to register call:

Race Director: 845-373-8557 Ext 256

Mail this bottom form and entry fee to:

**Lori S. Hale
Maplebrook School
5142 Route 22
Amenia, NY 12501**

Checks Made Payable To: Hand in Hand

Name _____

Address _____

City _____ State _____ Zip _____

Phone/Email Address: _____

I would like to make a contribution \$ _____

Total Amount Enclosed: \$ _____

Waiver: In consideration of this entry being accepted, I do for myself, my heirs, executors, and administrators waive and release any and all claims for damages I may have against the Hudson Valley Rail Trail Association, The City of Poughkeepsie, The New York State Parks and Recreation, Maplebrook School, Mid-Hudson Bridge Authority, Saint Francis Hospital and any other volunteers or organizers of the race. I certify that I am physically fit, and sufficiently trained for this event. I also understand that the course may be open to vehicular traffic during the race, as well as other risks, including, but not limited to, falls, contact with other participants and the conditions of the course.

Signature of parent or guardian if under 18 _____ Date _____

Circle One: Super 5K Fun Run Walk

Male/Female Age: _____

Assigned Bib # _____