

shamrock Run



27th Annual Run
In Memory of
Tom Casey



Benefiting
Caring Hands
Soup Kitchen



Sunday, March 15th, 2015 — 12:50 p.m. (sharp!)

Academy Green, Kingston

Flat, Fast and First Class — only 2 miles

START: Academy Green, Kingston, 12:50pm sharp
FINISH: At the foot of Broadway
ENTRY FEE: Prior to March 1st: \$15.00. On or after March 1st: \$25.00
 Optional Saturday T-Shirt Pickup for both Team & Individuals at the foot of Broadway on March 14th from 10am to 2pm
 Check in and Race Day Registration 10:00 a.m. – 12:30 p.m.
 Across from Academy Green at Governor Clinton Apartments, 1 Albany Avenue.
 Team pick-up by ONE person at Team Table ONLY.

Long sleeve T-shirt for first 3000 registrations postmarked by March 1st.

Post Race Party - ID Required for post race party: 1:30 pm at the Rondout Neighborhood Center, 105 Broadway, Kingston

PRIZES: Randomly drawn from all registered runners. **You must have a race number and be present to win.**

Help us end hunger in Ulster County. Please bring non-perishable food to registration and we will distribute all collected food to a local food pantry.

Please visit our website at www.shamrockrun.org or like us on Facebook

Online registration available on



www.active.com

Search for Shamrock Run Kingston

**MAIL REGISTRATION FORM
AND CHECK PAYABLE TO:**
 SHAMROCK RUN
 c/o Carey Construction
 78 Furnace St., Kingston, NY 12401
Please Do Not Staple Checks

shamrock run
 sunday, march 15th, 2015



Last Name	First Name	Email	()
Mailing Address	Street	Phone	
City	State	Zip	Shirt Size (XL,L,M,S)

Trophy for School with largest number of entrants PRE-REGISTERED

Team Registration: Send race forms and fees together. One person picks up T-shirts for team. Individual T-shirts will only be given to individual registrants.

Exact Name of School	Contact Person	Phone
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For group entries or questions, please call Carly (845) 532-5934 or email info@shamrockrun.org

No refunds, exchanges, or transfers. No animals will be permitted to accompany the runners.

In consideration of accepting this entry, I the undersigned, intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Ancient Order of Hibernians, the Irish Cultural Center Hudson Valley, the City of Kingston Parks and Recreation Department, the City of Kingston, and any and all sponsors, and their representatives, successors and assigns for any and all injuries suffered by me in this event. I attest and verify that I am physically fit and have trained sufficiently for this event and my physical condition has been verified by a licensed medical doctor. I hereby grant full permission to use photographs, videotapes, recordings or any other record of this event for promotional purposes.

An additional Donation \$ _____ to benefit Irish Cultural Center HV

Signature of Participant _____ **Date** _____

Signature of Parent or Legal Guardian _____ **Date** _____

(for participant under 18)