



# Ed Erichson Memorial Races

## 5 Mile and 10 Mile Races



**Date:** Sunday, March 7, 2010

**Time:** 9:00 am for 5 mile  
9:15 am for 10 mile

**Place:** LaGrange Town Hall, 120 Stringham Road, LaGrangeville, NY

**Race Day Registration:** Opens at 8:00 am

**Fee:** Pre-registration (by March 1)  
\$12 for MHRRC members  
\$15 for non club members

**Race Day**  
\$20



MHRRC is proud to have MVP Health Care as our race sponsor.

**Awards:** Men: up to 18, 19-29, 30-39, 40-49, 50-59, 60-69, 70+  
Women: up to 18, 19-29, 30-39, 40-49, 50-59, 60+  
Tee shirts to first 100 pre-registered

**Info:** Linda Stow (845) 462-7290 or [lstow1@gmail.com](mailto:lstow1@gmail.com)

**Pre-Registration:** Use MHRRC shopping cart to register or  
Checks payable to MHRRC and mail to  
Linda Stow, 11 Flamingo Drive, Poughkeepsie, NY 12601

**Restrictions:** No walkers, roller blades, baby strollers, dogs, showers

I know that running and road racing are potentially hazardous activities. I will not enter this race unless I am medically able and properly trained. I assume all risks associated with this event, including but not limited to, falls, contact with other participants, the effects of the weather including low temperature and/or precipitation, traffic, and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, 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 claims for damages I may have against the Mid-Hudson Road Runners Club, Town of LaGrange, sponsors, Race Director, and their agents, employees representatives, successors, and assigns, from any and all liabilities, claims, demands, and causes of action whatsoever arising directly or indirectly from my participation in this event. I also release my rights to any photos, videos, images, etc. taken of me during this event.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

(Parent's signature if under 18)

**Age:** \_\_\_\_\_ **Gender:** F M

**Date of Birth:** \_\_\_\_\_

**Circle one:** 5 Mile 10 Mile