

FALL FESTIVAL 5K RUN/WALK

September 13, 2015

Starting Line:

Early Childhood Learning Center

12857 Route 438

Irving, NY 14081

Start Time: **9:00AM**



Food Is Our Medicine
HEALTHY FIRST NATIONS

AWARDS:

The top male and female finishers will receive medals as well as the top three finishers in each age group. The walk is not competitive.

Packet Pickup

Registration and early packet pickup will be available

Friday, September 11 from 8am – 4:30pm at the

Wellness Center Reception

36 Thomas Indian School Dr., Irving, NY 14081

(716)532-8223

All registrants will receive dri-performance shirts. Register early to ensure your size will be available on race day

Late Registration

Late Registration and packet pickup is also available

on race day from 7:30am to 8:30am SHARP

www.FoodIsOurMedicine.org

This race supports Food Is Our Medicine Project sponsored by Seneca Diabetes Foundation

Entry Fees

Yes, I would like to run/walk

\$15 (18U & 60+)

\$20 (before 9/4)

\$25 (9/4 or later)

No, I'm not interested in the run/walk but I would like to make a contribution:

\$25

\$50

\$_____

Make checks payable to: Seneca Diabetes Foundation; **Mail to:** P.O. Box 309, Irving, NY 14081

Last Name

First Name

M.I.

Street Address

City

State

Zip code

Email

Sex

Age

Birthdate

Check one: Walk Run

Phone

SHIRT SIZE (circle one):

S M L XL 2X 3X

EMERGENCY CONTACT NAME: _____ PHONE: _____

I know that running or walking in a road race is a potentially dangerous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running or walking in this event including, but not limited to, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I formally waive and release the Fall Festival Committee, the 5K Walk and Run Committee, the Town of Irving, and all race sponsors, supporters, and officials, their representatives, and successors from all claims of liabilities of any kind arising or of this event for any legitimate purpose.

Signature

Date

Parent/Guardian, if registrant is under 18

Date



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Strong in spirit. Strong in body.

