

# Half Hollow Hills PTA Council and School District Present

## Half Hollow Hills Harvest Fair & Fall 5K Run/Walk

Sunday, Nov. 5, 2017



LITF Certified Course

**Location:**  
**High School East**  
**50 Vanderbilt**  
**Parkway**  
**Dix Hills, NY**



**EARLY ENTRY FEE (postmarked by Oct. 27, 2017)**

**5K Run/Walk: \$20.00 Adult; \$5.00 Child (up to grade 12)**

**T-shirts for all early entry runners**

**ON RACE DAY**

**5K Run/Walk: \$25.00 Adult; \$10.00 Child (up to grade 12)**

**Fun activities and Fair to follow run**

**\*\* RACE DAY Check-in Time: 7:00-8:15 a.m. at HS East**

**\*\* START TIMES: 5K Run/Walk 8:30 a.m.**  
**Harvest Fair 10:00 a.m.12:00 p.m.**

**5K Awards (Medals):**

**Top Overall Male/Female**

**Age Group: 3 deep in 5-  
year age group**

T-Shirts to the first 300 5K registrants  
Indicate Shirt Size: Adult

S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_

### HHH 5K RUN/WALK HARVEST FAIR

**Register online: [www.justfinish.net](http://www.justfinish.net)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male ☐ Female ☐

Please complete entry blank, read the following statement and sign below. In consideration of your accepting this entry, I the undersigned, intending to be legally bound do hereby, for myself, my heirs, executors and administrators, waive and release and hold harmless the HHH School District and PTA, Just Finish, Inc., Suffolk County Police, Volunteer Fire Dept. of Dix Hills, The Town of Huntington and all their representatives, successors and assigns, for any and all liabilities, claims, demands and causes of action whether or not arising in whole or in part out of the negligence of the above organizations or individuals. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and a licensed medical doctor has verified my physical condition. If signed by a parent, the parent agrees to release and hold the above-named organizations and personnel harmless of any claims which may be asserted on behalf of entrant. Further, I hereby grant permission to any and all of the foregoing to use any photographs, videotapes, motion pictures, recordings and any other record of this event whatsoever.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent's signature, if under 18 years old) **Make check payable to:** HHH CSD **Mail to:** Attention 5K Run, HHH PTA Council, 525 Half Hollow Road, Dix Hills, NY 11746

**Questions? Please Contact: Wendy Natalone, Race Coordinator - 631-549-6726/ [jwjnat@msn.com](mailto:jwjnat@msn.com); Tina Shek, Fair Coordinator - 631-940-6008/[tinakimshek@hotmail.com](mailto:tinakimshek@hotmail.com); or Patrick Murphy, Director of Health and Physical Education - 631-592-3067/ [pmurphy@hhh.k12.ny.us](mailto:pmurphy@hhh.k12.ny.us).**

