

# Elizabeth T. McNamee

## 18TH ANNUAL

LONG ISLAND  
TRACK & FIELD 2016



**USATF Certified Course & Sanctioned Race**

3.1 miles professionally timed by Start to Finish Corp. This race is a fast, flat course. Mile splits with 2 water stops. Starts and finishes at West Islip High School.



**Help Us Raise Additional Funds**



Please bring old cell phones and used inkjet cartridges to this event.



# 2016 MEMORIAL 5K RUN Sunday, May 8, 2016

**PRE-REGISTRATION**

**\$20 5K Run/Walk** (with T-shirt)

**\$15 1-Mile Fun Run/Walk** (with T-shirt)

**Checks made payable to:** Elizabeth T. McNamee Memorial Fund, Inc.

**Mail Entry Form & Check to:** P.O. Box 213, West Islip, NY 11795

**All Pre-Registration entries must be postmarked by May 1, 2016**

**Pre Registration Packets available on May 7** from 12:30pm -2:00pm at West Islip High School. (Pre-Registrants Only)

**RACE DAY REGISTRATION:** (Till 9:00 am Sharp)

\$25 5K Run/Walk (T-shirts while supplies last)

\$15 1-Mile Fun Run/Walk (T-shirts while supplies last)

**CHECK-IN**

Pre-registration & post registration can be picked up at West Islip High School on the day of the race from 7:30am - 9:00am SHARP

**RACE STARTING TIMES**

**1 Mile Fun Run/Walk** - Starts at 9:00am at the High School Track

**5K Run** - Starts 9:30am Rain or shine.

**AWARDS**

**Overall:** Top Male & Female

**Masters:** Top Male & Female

**Senior Masters:** Top Male & Female

**Top 3 Finishers:** (Following Categories) 10 & Under, 11-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-85, 86+ and WHEELCHAIR.

**LITF GRAND PRIX SERIES POINTS**

**RACE TIMING**

Start to finish Corp., using the My Laps Chips. Results will be posted on-site and on-line at [www.start2finish.com](http://www.start2finish.com) on the day of the race.

**POST RACE**

Food, Drinks, Raffles, Award Ceremony and Music

**FOR ADDITIONAL INFORMATION** Call (631) 321-0806

or visit us on-line at [www.elizabethmcnamee.org](http://www.elizabethmcnamee.org)

**ENTRY FORM - For additional entry forms please visit our website [www.elizabethmcnamee.org](http://www.elizabethmcnamee.org)**

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_ DOB: MONTH/DAY/YEAR \_\_\_\_\_ AGE ON RACE DAY \_\_\_\_\_

**5K RUN/WALK** (\$20)  **1 MILE FUN RUN/WALK** (\$15)  **WHEELCHAIR**  **MALE**  **FEMALE** **T-SHIRT SIZE:** S  M  L  XL

\_\_\_\_\_  
ENTRANT'S SIGNATURE PARENT OR GUARDIAN SIGNATURE (If entrant is under 18 years of age) DATE

I know that running a road race is a potentially hazardous activity and I assume all risks associated with running in this event, including but not limited to falls, contact with other participants or spectators, the effect of weather, including heat and humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Therefore, in consideration of your accepting this entry, I, the undersigned, intending to be legally bound hereby for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against the Elizabeth T. McNamee Memorial Fund, Inc., Start To Finish Corp., USATF-LI, all race Sponsors, the Hamlet of West Islip, the Township of Islip, the police of Suffolk County, New York, the Volunteer Fire Departments of West Islip, New York, and Suffolk County, New York, and their representatives, successors and assigns for any and all injuries suffered by me in said event and all claims for liabilities of any kind arising out of my participation in this event even though that liability may arise out of the negligence or carelessness on the part of persons named in this waiver. (If signed by a parent, the parent agrees to waive, release and hold harmless the above mentioned organizations and individuals from any and all said liabilities, claims and causes of action which may be asserted on behalf of the entrant). I attest and verify that I will participate in this event as a foot-race entrant and that I am physically fit and have sufficiently trained for competition of this event and that my physical condition has been verified by a licensed medical doctor. Further, I grant full permission to any and all of the foregoing to use any photographs, videotapes, motion pictures, recordings or other records of this event for any legal purpose whatsoever. In the event that an Act of God necessitates the cancellation of the race, I understand that the sole responsibility of the race will be to provide a free race T-shirt for pick-up at a time and place that will be announced. **No baby strollers, roller skates, headphones, bicycles or animals will be allowed on the race course.**

**Please return entry forms to:** Elizabeth T. McNamee Memorial 5K Run - P.O. Box 213 West Islip, New York 11795

**I choose not to participate, but would like to make a donation in the amount of \$ \_\_\_\_\_**

Under a new mandate adopted by the USATF, We are required to provide a space on our entry application where disabled persons can have the opportunity to write in a reasonable accommodation for their disability. Please provide any information required. **All request must be received at least 4-6 weeks prior to the event.**

**SEND REQUESTS TO:** USATF Headquarters Attn: ADA Accommodations 132 East Washington Street, Suite 800, Indianapolis, Indiana 46204