In Memory of **Rob Lauterborn**

ROB'S RUN is dedicated to the memory of Rob Lauterborn, member of the Plainview-Old Bethpage Road Runner's Club, talented runner and extraordinary human being.

> Please make plans to donate at the

Athletes for Life Blood Drive Sunday Dec. 10, 2017

Donating blood is literally giving the gift of life. Each day, our local area needs close to 2,000 people a day to roll up their sleeves to give the gift of life. There is simply no substitute for voluntarily donated blood. Without volunteer donors, our community would not have an adequate community blood supply.

> For more information call Linda at (516) 349-7646

ROB'S RUN is the Finale of the 2017 USATF-LI Cross Country Series





THANK YOU TO OUR GENEROUS SUPPORTERS







Street, Suite 24, Plainview, NY 11803 Dupon 101 Club, NDIVIDUAL Running (sland **SOB** Send Entry and Check (Payable to GLIR

First name:Last Name:	lame:	
Address:Town:	vn:	State: Zip:
Phone:Ema	Email:	
Date of Birth: Age on race day: Ma	Male Female_	e Additional Donation \$
JSATF-LI Member GLIRC Member Athletes for Life Summer Blood Drive Donor (no entry fee)	mer Blood Drive Do	nor (no entry fee)
In consideration of accepting this entry, the signatory above, 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 Greater Long Island Running Club, New York Blood Center, Nassau County, the Town of Oyster Bay, the Center for Developmental Disabilities, JMS Racing Services, all event sponsors, and their agents, employees and representatives for nay and all damages and injuries suffered by me in this event, whether or not caused in whole or in part by the fault or negligence of any 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 that my condition has been verified by a licensed Medical Doctor. I hereby grant permission to any and all of the foregoing to use any photographs, video tapes, motion pictures, recording, or any other record of this event for any purpose.	ly bound, hereby for n and Running Club, Nee ind their agents, empl ault or negligence of a vent and that my cor apes, motion pictures.	the signatory above, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release s I may have against the Greater Long Island Running Club, New York Blood Center, Nassau County, the Town of Oyster Bay, the 4S Racing Services, all event sponsors, and their agents, employees and representatives for nay and all damages and injuries r not caused in whole or in part by the fault or negligence of any of the above organizations or individuals. I attest and verify ently trained for the completion of this event and that my condition has been verified by a licensed Medical Doctor. I hereby regoing to use any photographs, video tapes, motion pictures, recording, or any other record of this event for any purpose.

If under 18 years old, signature of parent or guardian

Date:

Date of bit ut Age of face day Male refinate Additional pollation a	= 4
Signature (Parent if entrant is under age 18):	Date:
In consideration of accepting this entry, the signatory above, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release	xecutors and administrators, waive and release
any and all rights and claims for damages I may have against the Greater Long Island Running Club, New York Blood Center, Nassau County, the Town of Oyster Bay, the Center for Developmental Disabilities. IMS Racino Services, all event sponsors, and their agents, employees and representatives for nav and all damages and initiaries	enter, Nassau County, the Town of Oyster Bay, sentatives for nav and all damages and initiries
suffered by me in this event, whether or not caused in whole or in part by the fault or negligence of any of the above of	organizations or individuals. I attest and verify
that I am physically fit and have sufficiently trained for the completion of this event and that my condition has been verified by a licensed Medical Doctor. I he permission to any and all of the foregoing to use any photographs, video tapes, motion pictures, recording, or any other record of this event for any purpose	ed by a licensed Medical Doctor. I hereby grant record of this event for any purpose.

Address:	Zip:
Phone: Email: Email:	
Date of Birth Age on race day: Male Female Additional Donation \$	
Signature (Parent if entrant is under age 18): Date: Date:	Date:
NAME OF RUNNER #2:	
Address: Town: Zip:	Zip:
Phone: Email: Email:	
Date of Birth Age on race day: Male Female Additional Donation \$	
Signature (Parent if entrant is under age 18): Date: Date:	Date:
NAME OF RUNNER #3:	
Address:	Zip:
Phone: Email: Email:	
Date of Birth Age on race day: Male Female Additional Donation \$	
Signature (Parent if entrant is under age 18): Date: Date:	Date:
NAME OF RUNNER #4:	
Address:	Zip:
Phone: Email: Email:	
Date of Birth Age on race day: Male Female Additional Donation \$	
Signature (Parent if entrant is under age 18): Date: Date:	Date:
In consideration of accepting this entry, the signatory above, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release	rators, waive and release

TEAM NAME:	Category (check one) Middle School Girls Middle School Boys High School Girls High School Boys Open Female Open Male Open Co-ed Masters Female Masters Male Masters Male Masters Co-ec	ROB'S RUN - TEAM ENTRY Send Entry and Check (Payable to GLIRC) to: Greater Long Island Running Club, 101 Dupont Street, Suite 24, Plainview, NY 11803 ONLINE REGISTRATION AVAILABLE AT www.glirc.org thru 9:00 AM on Saturday, NOV 25th. *Team award results will not be affected by team members starting in different waves.
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LOCATION/DIRECTIONS

Stillwell Woods is located on South Woods Road, one mile North of Jericho Turnpike (Route 25) in Syosset.

From L.I.E., Northern State or Southern State Parkway: Take Seaford-Oyster Bay Expressway (Route 135) north to Jericho Turnpike eastbound. Left onto South Woods Road. The Center for Developmental Disabilities (CDD) (site of check-in) is on your right opposite the tennis courts. Stillwell Woods is immediately next door to CDD.

REGISTRATION

Pre-Registration Fees

Individuals \$26; teams (four on a team) \$104

50% discount for pre-registered runners High School or younger. FREE Entry for pre-registered Athletes for Life Summer Blood Drive donors!

Day of Race Registration at CDD

Individuals \$30; teams (four on a team) \$120

Mail entries with checks payable to "GLIRC" to: GLIRC

101 Dupont Street - Suite 24 Plainview, New York 11803

REGISTER ONLINE at www.glirc.org

Online registration closes 9:00 AM Saturday, November 25th.

Timing and Scoring by:

JMS Racing Services, using the RFID Timing System.

CHECK-IN:

On November 26th (day of race) from 7:15 AM to 8:45 AM at the Center for Developmental Disabilities, 72 South Woods Road in Woodbury

Every entrant will receive a SURPRISE top quality merchandise giveaway - you will love it!

PLEASE NOTE: Rob's Run is a cross country run, not a road race. Surfaces on the grass and cross country trails may be uneven. Please keep your wits about you! Headphones are strongly discouraged for the safety of all participants.

Co-Race Directors: Jim Murray & Sue Fitzpatrick For info call (516) 349-7646

AWARDS

Individual Awards

First three Male & Female overall; first three Male & Female in age groups: 10 and under, 11-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85 and over.

Team Awards

Team awards to the top three teams in each of the following categories:

- Middle School Girls
- Middle School Boys
- High School Girls
- High School Boys
- Open Female
- Open Male
- Open Co-ed (2 M & 2 F)
- Masters Female
- Masters Male
- Masters Co-ed (2 M & 2 F)
- Senior Masters Female (All age 50+)
- Senior Masters Male (All age 50+)
- Senior Masters Co-ed (2 M & 2 F; All age 50+)

Team CASH Awards* - \$200 per team stipend for the first place Men's Open, Women's Open, Men's Masters & Women's Masters Teams. NOTE: Only USATF-LI member teams are eligible for Team Cash Awards! All team members must be registered on the same USATF-LI team.

All Team Awards will be computed on the basis of "cross country scoring," i.e. by place

*Team award results will not be affected by team members starting in different waves.



CASH PRIZES!

\$250 - 1st Place Male & Female/Open & Masters \$150 - 2nd Place Male & Female/Open & Masters **\$100 - 3rd Place Male & Female/Open & Masters**