



2017 Marlborough Lions Club Round The Lake 5K

Sunday May 28, 2017 at 10:30 am - Blish Park - Park Rd -Marlborough, CT

Course: Start and Finish at Blish Memorial Park. This scenic course around Lake Terramuggus includes a few steady upgrades, long stretches of level terrain and a challenging finish.

Features: Electronic Timing and computerized race results from Platt Systems, Mile Splits, Water and first aid station, and post-race refreshments. Come dressed to run. First 200 pre-registered will receive a free race t-shirt.

Awards: Overall - Men's & Women's First Place Trophies; Each Division - Men's and Women's 1st , 2nd, & 3rd place trophies

Fees: \$20 Pre-Registration
\$25 Day of Race Registration until 10 am
\$50 Maximum per Family

Proceeds from this event will be used by the Marlborough Lions Club to help fund service and local community programs.

For further information, please contact:

JeanPaul Bolduc at 860-295-9150 jeanpaul.bolduc@hhhealth.org
Pete Catania at 860-295-8621 pdcatania@snet.net

Waiver: In consideration of acceptance of this entry in the Marlborough Lions Run Round the Lake 5K Road Race, I the undersigned intending to be legally bound to hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the race director and officials, Town officials, Marlborough Lions, Platt Systems, any and all race sponsors and supporters, volunteer medical and support staff, their agents, successors, and assigns of the all of the foregoing from any all and all claims for damages, demands , and causes of actions arising from my participation in the Run Round the Lake 5K. I assume all risks with entering this event. Including but not limited to falls, contact with other participants, effects of weather, including snow, ice, traffic, the condition of the race course. All such risks being known and appreciated by me. I attest and verify that I (and family members) are physically fit and sufficiently trained for the completion of this event and my (our) physical condition has been verified by a licensed medical doctor within the last six months. Further, I hereby grant full permission to any and all the foregoing to use my photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purposes without compensation or remuneration.

Name _____

Address: _____

City: _____ State: _____ Zip _____

email: _____

Age: _____ Gender: M / F

Signature or Parent's Signature if entrant is 18 yrs old and under

PLEASE CHECK	
<input type="checkbox"/>	Junior 13 & under
<input type="checkbox"/>	High School 14-19
<input type="checkbox"/>	Open 20-29
<input type="checkbox"/>	Sub-Masters 30-39
<input type="checkbox"/>	Masters 40-49
<input type="checkbox"/>	Grand Masters 50-64
<input type="checkbox"/>	Seniors 65 and over

Checks payable to Marlborough Lions Club



Mail Form to:
Platt Systems
41 Steele Farm Dr
Manchester, CT 06042