



Please mail this form to the YMCA branch address on the back of this card

FIRST NAME						
LAST NAME						
☐ MALE ☐ FEMALE SHIRT SIZE						
YMCA 5K SERIES LOCATION  ☐ PATCHOGUE FAMILY YMCA ☐ HUNTINGTON YMCA ☐ GREAT S BAY SHORI						
age on race day						
ADDRESS						
CITY/ STATE/ZIP						
E-MAIL (TO BE USED TO COMMUNICATE RACE INFO)  PHONE						
EMERGENCY CONTACT NAME / PHONE						
ENTRY FEES						
Adult: Youth: 5K Serie	s:					
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## PARTICIPATION WAIVER

Race fees are not refundable, nor are they transferable from year to year. Once you are signed up, race fees are used for race expenses and cannot be returned.

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In consideration of accepting this entry, Lunderstand and agree to be legally bound hereby for myself, my heirs, executors & administrators, successors & assigns and wake, release & hold harmless eliteteats, finc, Race Organizer, Race Director and all sopposors s. I, the undersigned, hereby wake any and all rights and claims I may have against the VMC of Long Island and its facilities in Bay Shore, Huntington and Patchogue, YMCA of the USA, the villages/towns in which the races are held, any volunteers and all race sponsors for damages which I may have arising from this event. I am physically fit and have trained for this event. The applicant warrants 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 and pictures, or any other rector of this event, for any purpose whatsoever. If signed by a parrent the parent agrees to release and hold the above names organizations and persons harmless of claims which may be ascerted by or on behalf of the entrain. Further, I hereby grant permission to any and all of the above memorion of organizations and secreted by or on behalf of the entrain. Further, I hereby grant permission to any and all of the above memorion of organizations and not be seven for any purpose whatsoever.

If signed by a parent, the parent agrees to release and hold the above named organizations and persons harmless of any claims which may be asserted by or on behalf of the entrant as well.

SIGNATURE (If participant is under 18, parent/guardian must sign) DATE

Honoring Rich Sallustro - LANRover Network Services

Name:			Business:			
Address:						
Phone:			Email:	_ Email:		
Please Circle Sponsorship Level Desired:						
Platinum	Gold	Silver	Bronze	Donation		
Amount Enclosed: Check (payable to Patchogue Family YMCA)						
Credit Card	I			Exp Date:CVV		
Signature:						

## **SPONSORSHIPS AVAILABLE:**

## Platinum Package ......\$1,000

- Recognition at the awards ceremony.
- Your company/individual name as a Platinum Sponsor on the shirts given to participants.
- Photo opportunity with the overall winners.
- Up to 10 complimentary race entries.
- A marker on one of the mile markers.

# Gold Package......\$500

## \*Includes Silver Package, plus:

- · Recognition at the awards ceremony.
- Up to 5 complimentary race entries.

## Silver Package ...... \$300

- Up to 2 complimentary race entries.
- Your Name or Company Name on Race Day Shirts.

### Bronze Package ...... \$ 100

• Company/individual name on race day banner.

Deadline: March 11, 2020 for name on shirts.

# FOR MORE INFORMATION

Nancy Rettaliata Nancy.Rettaliata@ymcali.org or call at 631,891,1800



**PATCHOGUE FAMILY YMCA** 

255 West Main Street Patchogue, NY 11772 631.891.1800