

2010 START! WALL STREET RUN & HEART WALK REGISTRATION FORM

NYRR Member # _____ Estimated Pace Per Mile _____

Last Name _____ First Name _____

Emergency Contact Name and Tel. (Required) _____

Race-day Age _____ Birth Date _____

Address _____

City _____ State _____ Zip _____

Company _____ Telephone _____

E-mail Address _____ Name of Team _____

Check one if you will be using a: Wheelchair Handcycle

Please send me _____ brochures(s) I want to learn more about forming a corporate team

Please send me more information about the American Heart Association

ENTRY FEE

	NYRR Members	Non-Members
On or before May 6	\$20	\$30
After May 6	\$25	\$35

*Members: You must bring your NYRR membership card on race day to receive your discount; otherwise you will be charged the non-member race fee. No exceptions.

SUPPORT THE AMERICAN HEART ASSOCIATION

Please consider making a donation to support the lifesaving work of the American Heart Association. Your gift will help support advocacy, research, education, and other initiatives in the community. Consider it an investment in your future!

I would like to make a donation to support the lifesaving work of the American Heart Association \$ _____

JOIN NEW YORK ROAD RUNNERS!

Become a member, \$40 Renew your membership, \$40

PAYMENT

Enclosed is my check made payable to American Heart Association

Please charge to my: Visa Mastercard American Express

Credit Card # _____
Debit cards not accepted

Exp. Date _____

Cardholder Signature _____

Mail to: American Heart Association, 122 East 42nd Street, 18th Flr.
New York, NY 10168, Attn: WSRHW

Email: donald.cobb@heart.org

Fax: (212) 850-5136

WAIVER:

Start! Wall Street Run & Heart Walk Release and Indemnification

The Start! Wall Street Run & Heart Walk involves walking and/or running—activities which may include risks such as, but not limited to, falls, interaction with other participants, spectators or others, effects of weather, including heat and/or humidity, traffic and conditions of the course. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including personal injury and death, arising in any way out of my participation in the Start! Wall Street Run & Heart Walk and related activities.

It is my responsibility to dress appropriately. Although route maps, rest stops, refreshments, and other assistance may be made available during this event, I am solely responsible for my own health and safety. I represent and warrant that I am physically fit and able to participate in this event and I agree to stop and request assistance if I experience any symptoms such as, but not limited to, dizziness, excessive fatigue, shortness of breath, pain or any other conditions which would make it difficult or unsafe to continue.

I know that participating in NYRR events is a potentially hazardous activity. I agree not to enter and participate unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I am voluntarily entering and assume all risks associated with participating in the event, including, but not limited to, falls, contact with other participants, spectators or others, the effect of the weather, including heat and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant to the Medical Director of this event and his designee access to my medical records and physicians, as well as other information, relating to medical care that may be administered to me as a result of my participation in this event. Having read this Waiver and knowing these facts, and in consideration of your acceptance of this application, I, for myself and anyone entitled to act on my behalf, waive and release New York Road Runners, Inc., Road Runners Club of America, USA Track & Field, the City of New York and its agencies and departments, USA Track & Field – Metropolitan and all event sponsors, and their representatives and successors, from present and future claims and liabilities of any kind, known or unknown, arising out of my participation in this event or related activities, even though such claim or liability may arise out of negligence or fault on the part of any of the foregoing persons or entities. I grant permission to the foregoing persons and entities to use or authorize others to use any photographs, motion pictures, recordings, or any other record of my participation in this event or related activities for any legitimate purpose without remuneration.

Signature: _____
(or parent's signature if under 18)

Date: ____/____/____