



**Flanders, Riverside and Northampton Community Association**

**4<sup>th</sup> FRNCA**

**5K Scholarship Run/Walk**

*Sponsored by Legislator Bridget Fleming and Assemblyman Fred Thiele*

**at: Suffolk County Community College Eastern Campus**

**Sunday, October 15, 2017 - 10am - rain or shine**

*Managed by Island-Timing - [www.lirunning.com](http://www.lirunning.com)*

**Cost: \$20.00 - Pre-Registration. \$30.00 Race Day Registration - T-shirts while supplies last.**

**Eligibility: Open to all runners, joggers, and walkers of all ages (no animals except service dogs).**

**Day of Event Check-In and Registration: between 8:00 - 9:30am.**

**By Mail: see instructions below on where to mail application.**

**Online: Go to FRNCA.org and follow the directions or to:**

**[www.itsyourrace.com](http://www.itsyourrace.com)**

**Race Entry includes: T-shirt (guaranteed to first one hundred registrants), post-race award ceremony, post-race raffle, water, food & refreshments, medical aid.**

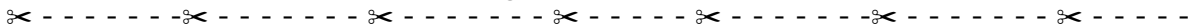
**Awards: Top male and female overall, top 3 male and top 3 female in each category: 12 and under, 13-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 and over and, top wheelchair racer.**

**5K course: The run starts and finishes at the Suffolk County Community College Eastern Campus.**

**Directions: Suffolk County Road 51 to 121 Speonk-Riverhead Road, Riverhead NY 11901. Go to Parking Field Number One (1).**

**For further information, Contact: Barbara-631-574-8958; Patty-631-727-3977 or Wendy-631-905-5288.**

**Registration Form**



**Please Print:**

**First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone: \_\_\_\_\_**

\_\_\_\_\_

**Address: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_**

\_\_\_\_\_

**E-mail: \_\_\_\_\_ Age on race day: \_\_\_\_ Gender: \_\_\_\_ Adult T-Shirt size: S**

**M L XL**

**Waiver: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to safely completing the run. I assume all risks**

associated to running in this event including, but not limited to: falls, contact with other participants, the effects of weather including heat and/or humidity, cold, dehydration, conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Flanders, Riverside and Northampton Community Association, Hampton Hills Golf and Country Club, Town of Southampton, County of Suffolk, all officers, agents, employees, volunteers, race directors, from and against any and all claims, actions or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, and any other record of this event for any legitimate purpose. Roller Blades, Baby Joggers, Headphones, Animals are prohibited from participating in this race.

**Signature:** \_\_\_\_\_ (If under 18, signature of parent or guardian) **Date:**

\_\_\_\_\_

***PO Box 602, Flanders, N.Y. 11901 •  
FRNCA.org***