



The 9th ANNUAL MICHAEL CASSIDY SHAMROCK 'N' RUN

OFFICIAL ENTRY FORM

SATURDAY MARCH 7, 2020

Start & Finish:

Start and finish on Monona Ave. at Memorial Park Rain or Shine or Cold (chip timed)

Schedule of Events:

8:00 am - Check-in begins 10:00 am - 5K begins 11:00 am - Awards

Entry Fees:

Pre-registration - \$25 (pre-registration closes 3/2/20) Day of race - \$30

Pre-registration for USATF \$22.00 Pre-Registration for Rutherford Residents \$20.00 (Pre-registration closes 3/2/20) Registration Race Day \$30 \*no refunds

Registration By Mail:

Michael Cassidy Memorial Fund P.O. Box 312 Wyckoff, NJ 07481

Questions:

Marilyn Cassidy 201-280-3748

Amenities:

The first 400 preregisters are guaranteed a race shirt. Post race refreshments and entertainment.

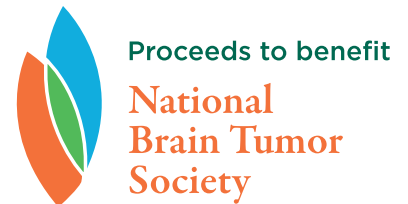
Race packets, race shirts and bib numbers may be picked up at Rutherford High School Thursday, March 5, between 5 and 8 pm.

Awards:

- Top 3 overall male & female
• Top 3 male & female per age group in 5 year age groups, 9 & under through 80+
• 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-80, 80+

Course:

Scenic Rutherford neighborhood; event sanctioned and course certified by USATF (Certification # NJ 13558JHP) Timing and Scoring by Elite Racing Systems



ENTRY FORM (Make checks payable to: Michael Cassidy Memorial Fund)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_
Street Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_
Phone: \_\_\_\_\_ Email: \_\_\_\_\_
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_
Indicate Shirt Size: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ USATFNJ# \_\_\_\_\_

WAIVER OF LIABILITY: In consideration for the acceptance of my entry, I, on behalf of myself, my heir, executors, administrators, and assignees, hereby release myself and discharge the Borough of Rutherford, Rutherford First Aid Squad, and Rutherford Police Department, Michael Cassidy Memorial Fund, associated sponsors, volunteers, USA Track and Field and all other sponsors or beneficiaries and their representatives, successors and assignees for all claims for damages and causes of action arising from or out of my participation in The 9th Annual Michael Cassidy SHAMROCK 'N' RUN 5K. I attest that I am physically fit for this event. I hereby certify that I have read all the terms and conditions of this release and intend to be legally bound thereby.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ (If under 18)