OUR TOWNE
BETHLEHEM

TURKEY TROT 2013

Fireworks!
Thanksgiving Eve
BCMS 7pm

Our **5K Fun RUN or WALK** is designed to be enjoyable for every person in your family, workplace and neighborhood. Gather all your family and friends and start Thanksgiving Day together. Grandparents, toddlers, and those who just want to create a little room for that Thanksgiving dinner are all welcome to be a part of this Run/Walk. The only ***"time"*** that will matter is the ***good time*** that you'll have at the TURKEY TROT while helping to support our **Bethlehem Food Pantry**.

Best Costume Awards!

Date: **THANKSGIVING DAY** -Thursday, November 28th 2013
Time: **9:00** RUN Start | **9:05** WALK Start (Packet Pickup starts at 7:00am)
Location: **Bethlehem Middle School** - 332 Kenwood Avenue, Delmar
Course: 5K (3.1 miles) - through Old Delmar neighborhoods
Registration Fees: **$20.00 Online at ACTIVE.com until 11/02/2013**
$15.00 Mail in by Saturday 11/02/2013
$20.00 Mail in 11/03/12 until race day
Kids 5 & under **FREE**
T-Shirts: **FREE T-Shirt** to first 2,000 registered participants!
Awards: 1st Place Overall Male & Female
Questions: 598-3434 or John@ourtownebethlehem.com

FIREWORKS & EARLY PACKET PICK-UP Wed -11/27/2013

Bethlehem Middle School, 332 Kenwood Ave. Delmar | 6pm to 9pm

Detach here ~ *You may submit one form for each family.*

$20.00 Now until race day
Kids 5 & under FREE

Name:_____ Phone#_____

Address:_____

City:_____ State:_____ Zip:_____

Shirt Size (circle one): SM MED LG XL XXL

Release: In consideration of the acceptance of my entry I, on behalf of myself, my heirs, executors, administrators, and assigners, hereby release myself and discharge: OUR TOWNE Bethlehem, the State of New York, Albany County, Bethlehem Central School District, and the Town of Bethlehem, as well as all other sponsors or beneficiaries and their representatives. I certify that I am physically fit and that my physical condition has been verified by a physician. I am aware that the medical support for this event will be volunteer medical personnel who will be prepared to administer first aid assistance only. I hereby grant permission to OUR TOWNE Bethlehem, and other sponsors of this event to use all information submitted in this application, and any record of this race containing my likeliness as well as race results including my name and competition time for any purposes whatsoever, including but not limited to pre-race and post-race publicity. I hereby certify that I have read all the terms and conditions of the release and intend to be legally bound thereby. **No pets please**. I agree NOT to wear a headphone during this event. **Race Clock at the Start/Finish for self-timing. Official results will not be compiled.**

Signature:_____ Date:_____
Signature of Guardian if under 18 years

Mail form & non-refundable payment payable to:

OUR TOWNE Bethlehem - 8 Clermont Street, Delmar, NY 12054

www.ourtownebethlehem.com

USA TRACK & FIELD