



12th ANNUAL on JUNE 20, 2020

Proceeds to Benefit:

Desmoid Tumor Research Foundation & LiveOnNY



Place: Chadwick Lake – Newburgh, NY

Start Time: 4 mile run 9:15 am 4 mile walk immediately following run Award Ceremony 10:45 am

Kids' 1/4 mile fun run to follow award ceremony

Pre-Registration: Students \$18 Adults \$22 Kids 1/4 mile Fun Run \$10 – Until May 1st.

Registration: After May 1st \$25.00 Adults Walk / Run (Student and Kids same as above)

Packet Pick-up: Friday June 19th Chadwick Lake Pavilion 5:30pm-7:30pm

Race Day Check in: June 20th 4 mile walk /run – 7:00am- 8:45am Kids 1/4 mile fun – 7:00am – 10:30am

Course: Run & Walk – 4 mile lap around scenic Chadwick Lake Kids Fun Run – 1/4 mile run

JOIN ONE OF OUR CHALLENGES.... GYM, STUDENT, POLICE, FIRE, TEACHER AND HONORARY

Non-racers will be charged \$5 for food – fun is free for everyone

Health Fair • Silent Auction

See the website www.lap4life.org for Health Fair Vendors and Silent Auction Items

PRE-REGISTER EARLY TO GUARANTEE YOUR T-SHIRT

(Shirts to first 400 pre-registered)

Race Bags with great giveaways will be supplied to the first 200 adult racers to pick up their numbers.

Prizes/Trophies awarded to top male & female run finishers. Trophies to 1st Place male & female walkers.

Medals awarded to first 10 Walkers and to all Children participating in Fun Run.

See Website for details about trophies (top 3 male / female age group finishers / Group-RUN Top finisher only).

Help Raise Money for the Cause by Donating see Pledge Page on our website www.lap4life.org

All donations are tax deductible – registered 501(C)3.

Online Registration Closes - June 16th. All Paper Applications must be mailed by June 10th.

for more information

Maddalena Casabianca-Reade, Race Director
www.lap4life.org | 845-325-3685 | madd@lap4life.org

Make checks payable to "Lap4Life Foundation"

Mail with bottom portion of flyer to: Lap4Life, 54 North Plank Rd, Newburgh, NY 12550

In consideration of accepting this entry, I, the undersigned, intending to be legally bound, for myself, my heirs, executors, and administrators, waive and release any and all claim for damages I may have against Lap4Life, and any other sponsors, their representatives and successors for any and all injuries suffered by me in this event.

Photo Consent: signing below gives my consent that photograph, videotapes, and/or movies may be taken of me by Lap4Life or an agent/volunteer thereof, for purpose of publication in the media, including newspaper, television and the World Wide Web. These items may be published, exhibited or otherwise used by lap4life for advertising or other purpose without my prior approval. I grant this consent as voluntary contribution to lap4life.

Name: _____

Address: _____

Gender: Male Female (circle one)

Age on Race Day: _____

T-Shirt Size: (adult) S M L XL (circle one)

T-Shirt Size: (child) S M L XL (circle one)

Check box if participating in a Team Challenge

Signature: _____
(Parent Signature if under 18)

Team Name: _____

Circle team type: Teacher / Student/ Police / Fire / Honorary / Gym
NOTE TO TEAMS: WE MUST HAVE AT LEAST 3 REGISTERED WITH THE SAME TEAM NAME BY JUNE 10TH OR NO TEAM.

