

The Angel Network of Cooperstown is a community-based organization dedicated to assisting families with children in the Cooperstown school district.

## Thank you!

Your contribution and support will touch a child's heart.

#### **RACES FOR ALL AGES!**

**TOT TROT** (Ages 2-12)

Register early to guarantee your race t-shirt.

# **Registration Fee**

If received on or before May 15 . . . . . \$10.00 After May 15 & Day of Race . . . . . . \$12.00

#### **Race Day Registration**

Registration for the TOT TROT begins at 3:00pm, and the race begins promptly at 4:00pm.

### **Race Categories**

Races will be broken down by ages: 2, 3, 4, 5-6, 7-8, 9-12.

# Fenimore 5K (All Ages)

Register early to guarantee your long sleeve race t-shirt.

## **Registration Fee**

If received on or before May 15 . . . . . \$20.00 After May 15 & Day of Race . . . . . . \$25.00

## **Race Day Registration**

Registration for the 5K begins at 3:00pm, and the race begins promptly at 4:30pm.

The application must be signed by a parent or guardian. Mail entry form to: Angel Network, PO Box 1186, Cooperstown, NY 13326, with check payable to Angel Network/ICI. The race will be run rain or shine.

- Walkers and baby joggers are welcome.
- No dogs permitted.
- Pre-registration fee is non-refundable.

	_
	J V
2014 TOT TROT Registration	3

Name	if Rec'd by 05/15	05/15	M (10-12), L (14-16) for Angel Network		Total Per Child
			□N □S □SX		
			□N □S □SX		
			□ □ W □ S □ SX		
		Total Amount	Total Amount Enclosed (\$10 per runner plus optional donation)	optional donation)	
My child cannot pa	articipate this year, bu	ıt I am happy t	My child cannot participate this year, but I am happy to make a donation to support The Angel Network	The Angel Network	
				Total Enclosed	
Waiver of Liability: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all my rights and claims for damages I may have against Angel Network of Cooperstown, the Village of Cooperstown, The Clark Sports Center, The Clark Foundation, and all sponsors and volunteer organizers of this race, their successors, representatives, and assigns, for any and all injuries suffered while traveling to and from and while participating in the race. I certify that my child(ren) is/are physically fit and able to run in this race.	ur accepting this entry, I, the undersigned, intending to bnd claims for damages I may have against Angel Networker organizers of this race, their successors, representative child(ren) is/are physically fit and able to run in this race.	ersigned, intending e against Angel Net accessors, represent able to run in this	to be legally bound, hereby for myself, m work of Cooperstown, the Village of Coop tatives, and assigns, for any and all injuries race.	y heirs, executors, and admin perstown, The Clark Sports Ce s suffered while traveling to a	nistrators, enter, The Clark and from and while
Signature of Parent/Guardian		Date	Phone	Email	

Name	\$20 Fee Per Runner if Rec'd by 05/15	Age as of 05/15	T-shirt Size	Optional Donation for Angel Network	Total Per Person
			xs□ s□ m□ t□ xt□		
			$XS \square S \square M \square L \square XL \square$		
			xs□ s□ m□ t□ xt□		
		Total Amount	Total Amount Enclosed (\$20 per runner plus optional donation)	ptional donation)	
l cannot þ	oarticipate this year, bu	ıt I am happy 1	cannot participate this year, but I am happy to make a donation to support The	he Angel Network	
				Total Enclosed	
Waiver of Liability: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all my rights and claims for damages I may have against Angel Network of Cooperstown, the Village of Cooperstown, The Clark Sports Center, The Clark Foundation, and all sponsors and volunteer organizers of this race, their successors, representatives, and assigns, for any and all injuries suffered while traveling to and from and while participating in the race. I certify that my child(ren) is/are physically fit and able to run in this race.	ccepting this entry, I, the unde claims for damages I may have	ersigned, intending against Angel Net	work of Connerctown the Village of Conne	heirs, executors, and adminerstown, The Clark Sports Confered while traveling to a	nistrators, enter, The Clark and from and while
Signature of Participant or Parent/Guardian	organizers of this race, their su ld(ren) is/are physically fit and	able to run in this	tatives, and assigns, for any and all injuries race.		



**Sunday, May 18, 2014** 

**Children Running For Children** 

TOT TROT begins at 4:00pm Races For Ages 2-12!

Fenimore 5K begins at 4:30pm

Chip timing available for pre-registered 5K runners.

The Clark Sports Center Fields
124 County Highway 52, Cooperstown, NY 13326