



RARITAN VALLEY ROAD RUNNERS

Tuesdays!

June 13 ~ June 27

July 11 ~ July 25

Races start at 7PM

Donaldson Park
GPS: 699 South 2nd Ave
Highland Park, NJ 08904

4 nights of challenging 5K cross-country races followed by a free picnic and awards. What better way to spend a summer night?

5K Individual Race & Series Awards:

Overall M/F top 3 Plus Top M/F in each age group: 12 & Under, 13-17, 18-24, 5-Year age groups 25-29 thru 80+

2.5K Fun Run Awards for all runners each race.

The 2.5K course is the first lap of the 5K.



Register online!

www.rvrr.org/summerseries

summerseries@rvrr.org

FEEES	Single Race	4-Race Series
5K 17 & under:	___ \$15.00	___ \$45.00
RVRR & USATF-NJ:	___ \$17.00	___ \$55.00
All Others:	___ \$21.00	___ \$65.00
Fun Run (2.5K):	___ \$ 9.00	___ \$28.00
2017 Series T-shirts:	___ \$25 (order by 6/13/17)	
Size (circle):	WS/WM/WL/WXL	S/M/L/XL
Race Day Fees :	5K for 18 years & over	\$21
	5K for 17years & under	\$17
	2.5K	\$10

If registering by mail, please make checks payable to
RVRR: 111 Lafayette Place, South Plainfield, NJ 07080

Name: _____
LAST FIRST

Sex: ___ M ___ F Age ___ on 6/13/2017

Email: _____

Address: _____
NUMBER AND STREET

TOWN STATE ZIP CODE

USATF-NJ# (5K only): _____

Date of Birth: ___/___/___

Emergency Phone: (____) _____-_____

Distance Entered: ___ 2.5K Fun Run ___ 5K

Races Entered: ___ June 13 ___ June 27

\$ _____ Total ___ July 11 ___ July 25

I, the undersigned, know that running is a potentially hazardous activity. I should not enter or enter my child unless I/he/she am/is medically able and properly trained. I agree to abide by any decision of a race official relative to my/his/her ability to safely complete the race. I assume all risks associated with my or my child running in these cross country events, including but not limited to falls, contact with other runners, the effects of the weather, including high heat and humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of my/his/her entry, I for myself or my child, and anyone entitled to act on my behalf, waive and release the Raritan Valley Road Runners, the race directors, all organizing committees, Middlesex County, USATF, USATF-NJ, the Road Runners Club of America and all their sponsors, representatives and successors from all claims or liabilities of any kind arising out of my/his/her participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signed: _____
(by participant, or guardian if participant is under 18)

34rd
Annual

**CROSS
COUNTRY**

Youth Development Running Series

Donaldson Park,
Highland Park NJ

GPS: 699 South 2nd Ave, Highland Park,
NJ 08904

Tuesday Nights!

June 13

June 27

July 11

July 25

AGE 13 & under!

2017 Youth Series

Appropriate for all children
ages 13 and Under!

Registration open 5:15 PM—5:45 PM

5:45 PM Warm-up Stretch

Races begin promptly at 6:00 PM

in the following order: Quarter-mile, Half-Mile,
One Mile and Lollipop Dash

Distance can be changed race day!

Amenities: Custom designed T-shirt for all pre-registered children running all four races. Pizza and water for all finishers. Children completing the lollipop race receive a lollipop at the finish line.

NOTES: These are non-competitive runs.

We want all children to enjoy the events and the activity of running.

We request parents' assistance in providing a high level of sportsmanship and camaraderie.

Please volunteer to help marshal the course and clean up after the event.

No place medals will be given. There will be a clock to record your child's time yourself, if interested.



FEES: Single Race 4-Race Series

By 6/4: ___ \$ 5.00 ___ \$15.00*

Day of Race: ___ \$ 7.00 ___ \$20.00*

T-SHIRTS: *One shirt included in series entry;
additional shirts \$10 each

More Info: www.rvrr.org

For additional updates & photos, join the Raritan Valley Road Runners Youth Development Running Series Facebook group at

www.facebook.com/groups/259774364132928/

Child's Name:

LAST

FIRST

Sex: ___ M ___ F

Date of Birth: ___/___/___

Address:

NUMBER AND STREET

TOWN

STATE

ZIP CODE

Phone: (___) ___-___

Email: _____

Races Entered: **Distance Entered:** **T-Shirts:**

___ June 13 ___ Lollipop (50 yd) ___ Youth Med

___ June 27 ___ 1/4 mile ___ Youth Large

___ July 11 ___ 1/2 mile ___ Adult Small

___ July 25 ___ 1 mile ___ Adult Med

\$ ___ Total Enclosed ___ Adult Large

Please make checks payable to:

RVRR

Mail to: 76 Park Avenue, Piscataway, NJ 08854

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Signed: _____

(by participant, or guardian if participant is under 18)

Date: _____

Emergency Phone: (___) ___-___