

Maureen Haas Elementary School Cross Country Meet

Open to: All New Milford elementary school boys and girls in grades PK-5. NO ENTRY FEE
Sponsored by: Hill and Plain PTO in conjunction with local businesses and volunteers
Date: Saturday, October 15, 2016
Rain Date: Saturday, October 29, 2016
Place: New Milford High School

Race Schedule:	<u>Race</u>	<u>Check-in time</u>	<u>Race Time</u>
	5 th grade girls race	8:40am	9:00am
	5 th grade boys race	9:00am	9:20am
	4 th grade girls race	9:20am	9:40am
	4 th grade boys race	9:40am	10:00am
	3 rd grade girls race	10:00am	10:20am
	3 rd grade boys race	10:20am	10:40am
	2 nd grade girls race	10:40am	11:00am
	2 nd grade boys race	11:00am	11:20am
	1 st grade girls race	11:20am	11:40am
	1 st grade boys race	11:40am	12:00pm
	K girls race	12:00pm	12:20pm
	K boys race	12:20pm	12:40pm
	PreK race	12:40pm	1:00pm

Course Distance: 1600 meters (1 mile): Grades 2-5
800 meters (1/2 mile): Kindergarten and first grade
400 meters (1/4 mile): PreK
Course will be on grass/turf and finish on the track

Awards: Individual honors will be presented to the top 3 finishers in each race.

Late Registration: Up to 20 minutes prior to race time. **ALL RACERS** must be at the starting line **5 minutes** prior to race time. **Late registers will NOT receive a T-shirt!**

Each runner must be accompanied by a parent/guardian or designated adult official in order to participate. No dogs allowed. No spectators on the track or field.

X.....
Cut out and return this form to your PE teacher by Wednesday, September 28, 2016!

Name _____ Grade _____ Teacher _____ School: _____

Address _____ Telephone # _____

T-shirt Size _____ (YS, YM, YL, YXL, AS, AM, AL, AXL)

Release: In consideration of the acceptance of my entry, I, myself, my heirs, executors and assigns, waive, release and discharge any and all rights and claims for damages against the meet director, officials, the New Milford Board of Education, the Boys/Girls Cross Country team and the New Milford Physical Education Department for all claims of damages, actions whatsoever in any manner arising or resulting from my participation in these races. I attest and verify that I have full knowledge of the risks involved in this race, and I assume their risks, and that I am physically fit and sufficiently trained to participate in this race.

Designated Adult supervisor _____

Parent/Guardian permission signature _____

Parent's signature authorizes the school nurse to administer medical treatment if necessary.