

The race will take place on the college cross country course. Starting times of all races are approximate.

Entry Fee Pre-Registration: \$10.00 for USATF Members \$12.00 for Non-members Pre-registration must be received no later than November 8, 2024. Day of Race: \$12.00 for USATF Members \$15.00 for Non-Members Day of race registration closes at 8:00 a.m.





Results: elitefeats.com/Results

<u>Awards</u>



Championship Medals: Top <u>3</u> Overall Male & Female Open & Masters Individual Age Group Awards: 19 & under, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85-89, 90+ Team Awards*: Top <u>3</u> teams - Male and Female, Open, Masters (40-49 & 50-59), Seniors (60+). * USATF Registered teams - Open Men - 5 score; Open Women, Male & Female Masters - 4 score. All senior teams (60+) 3 score. <u>Scoring will be by combined</u> <u>time of scoring members</u> (This means you need to run hard from start to finish!).

*All team scorers must be registered members of the same team. Team registration sheets will be available on race day.



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Date:____

Make checks payable to: LITF

Mail application to: USATF-LI X-C Challenge, 1988 Bergen Street Bellmore, NY 11710 For further information contact: Alex Cuozzo, 516-652-3555, president@longisland.usatf.org Directions: Take US 495 to I-135 (Seaford/Oyster Bay Expressway). The park entrance is at exit 8, Powel Ave/Plainview Road.

FIRST NAME	LAST NAME	
AGE ON RACE DAY	DATE OF BIRTH	MALE FEMALE & 8k
USATF #	TEAM AFFILIATION	e-mail:
ADDRESS]	PHONE
TOWN	STATE _	ZIP

I, the undersigned, intending to be legally bound hereto, for myself, my heirs, executors and administrators, waive, release and hold harmless the USATF-LONG ISLAND, All Round Foods, Foundation Running Camps, & ELITEFEATS, INC. for any and all liabilities, claims, demands and causes of action whether or not arising in whole or in part out of the negligence of any of the above organizations or individuals. I attest and verify that I am physically fit and have sufficiently trained for the completion of the event, and that a licensed Medical Doctor has verified my physical condition. Further, I hereby grant permission for USATF and its Long Island Association to use photographs, videos, motion pictures, recordings and any other visual and/or audio record of this event for any purpose whatsoever.

SIGNATURE_

If under 18, signature of parent or guardian _

Sanctioned & Officiated by USATF-Long Island