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<https://www.facebook.com/HambletonianMarathon>

Race Features:

- Full 26.2 mile marathon run on rolling country roads, village streets and trails of beautiful Orange County, NY at peak fall foliage season
- Three-person Relay also available (11.5, 9.8 and 4.9 miles respectively)
- Water & ROAR Sports Drink every 1 to 2 miles, gel & junk food stop(s)
- Well marked, well supported course
- Live music on the course
- Photographers on the course
- Professional Chip Timing
- USATF Certified Course # NY12148JG
- Boston Qualifier!
- Post race food tent
- Finish line and Finish Line Festival at the Historic Goshen Track including kids races, vendors, sponsor tents, and more!
- Finisher medal and heat sheet for all full marathon finishers
- Awards for overall winners, relay teams & 10 year age groups
- Tech shirt and goody bag for all runners
- Look for Hamby the Horse and the Clara the Cow on Cowbell Hill at mile 19.5 keeping you company on the course!
- Host Hotel – Comfort Inn & Suites, 20 Hatfield Lane, Goshen NY 10924 (approximately 1.5 miles from start/finish area and parking)

Register on line at:

www.chronotrack.com

Or visit

www.hambletonianmarathon.com

2014 PROCEEDS BENEFITED:



ADDRESSES & PARKING:

Start Line:

Park Place & Main Street, across from Limoncello Restaurant, 159 Main Street, Goshen, NY

Finish Line:

Goshen Historic Track, 44 Park Place, Goshen NY (less than 1/10 mile from start line)

Parking:

Orange County Government Center
255 Main Street, Goshen, NY 10924
(less than 2/10 mile from start /finish line)

Relay Exchange 2 (Mile 21.3):

Chester Depot (at the Heritage Trail)
19 Winkler Place, Chester, NY 10918
(approximately 6 miles by car from start / finish area)

Host Hotel:



20 Hatfield Lane, Goshen, NY 10924
(approximately 1.5 miles from start / finish)

Hambletonian[®] Marathon



& Good Time Trotters Relay Goshen, New York

**3-PERSON
RELAY ENTRY FORM**

**Third Annual Running:
October 18, 2015
8:00 am**

**Start: Lawyer's Row,
Park Place & Main Street,
Goshen, NY
Finish: Goshen Historic Track,
Goshen, NY**

**Hambletonian[®] Marathon, Inc.
& Good Time Trotters Relay
55 North Street
Middletown, NY 10940**

**www.hambletonianmarathon.com
info@hambletonianmarathon.com
Kathleen Rifkin, RD (845) 527-3825**

Good Time Trotters Relay

3-Person Relay Entry Form

Teams must be made up of 3-people. Please note on form to the right which runner will run which leg.

**ALL RELAY TEAM MEMBERS
MUST SIGN WAIVER BELOW**

WAIVER:

ALL RUNNERS PLEASE SIGN BELOW:

I know that running [volunteering for] a road race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road and trails, I acknowledge that the road is open to traffic and agree to run at my own risk, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or roller blades, animals, and personal music players are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Hambletonian Marathon & Good Time Trotters Relay, Hambletonian Marathon, Inc., the Villages of Goshen and Chester, the Towns of Goshen, Hamptonburgh, Walkill, and Chester, the County of Orange, Goshen Historic Track, Inc., The State of New York/NYS Department of Transportation, and the Road Runners Club of America, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my 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. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature of Runner 1 (or guardian if under 18) Date

Signature of Runner 2 (or guardian if under 18) Date

Signature of Runner 3 (or guardian if under 18) Date

Team Name _____

Category (check one):

- Male Open (all 3 male)
- Female Open (all 3 female)
- Mixed Open (M/F combination)
- Corporate (M/F combination, must work for the same company).
Name the company:

- Education (M/F combination. Can be teachers, staff, administrators or students. Can work at different schools).
Name the school(s):

- Law Enforcement / Corrections / Emergency Responders (M/F combination. Can be different locations/municipalities).
Name the locations/municipalities:

- Family (M/F combination. Must be related).
State the relation:

Relay Entry Fee:

- \$135.00 (1/1/15 to 4/18/15)
- \$150.00 (4/19/15 to 8/18/15)
- \$165.00 (8/19/15 to 10/16/15)

Relay registration ends Friday, 10/16/15 at 4pm

NO REFUNDS. YOUR ENTRY FEE WILL BE GOING TO A GREAT CAUSE!

Make checks payable to Hambletonian Marathon, Inc. and mail to 55 North St., Middletown, NY 10940

Substitutions within an existing team are ok (however, you may not transfer your entire team to another team). Please notify the Race Director as soon as you know of a substitution so changes can be made in the data base. **Absolutely no substitutions after Friday 10/16/15 at 4:00 pm. Substitutions unknown to the Race Organizers are not permitted and are at your own risk.**

Team Members:

Runner Leg 1

(11.5 miles) _____

Address _____

City, State, Zip _____

E-Mail _____

Phone _____

Age on 10/18/15 _____ M F

Shirt Size (please circle) XL L M S

Runner Leg 2

(9.8 miles) _____

Address _____

City, State, Zip _____

E-Mail _____

Phone _____

Age on 10/18/15 _____ M F

Shirt Size (please circle) XL L M S

Runner Leg 3

(4.9 miles) _____

Address _____

City, State, Zip _____

E-Mail _____

Phone _____

Age on 10/18/15 _____ M F

Shirt Size (please circle) XL L M S

**ALL RUNNERS PLEASE SIGN
WAIVER AT LEFT**