

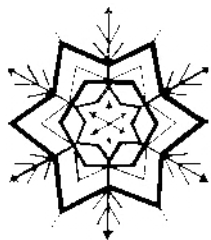


# Fulmont Roadrunners



# Winter Wimp Foot Race

## 32nd Annual Running!



- Saturday, January 13, 2018, at 1:00 p.m. **Snow or Shine!**
- 4.4 or 2.2 miles
- Hagaman, N.Y. (*Just north of Amsterdam*)
- Race Headquarters: Hagaman Firehouse , 126 S. Pawling St., Hagaman, N.Y. 12086
- Day of race registration: 11:00 AM to 12:30 PM
- Fee: Pre-race: \$18 for FMRRRC members; \$20 for non-members. Race day: \$25 for all. (*A portion of the entry fee goes to the club's James R. Dern Memorial Scholarship Fund.*)
- Online registration is available at [www.zippyreg.com](http://www.zippyreg.com)
- Special race souvenirs guaranteed to first 150 registered runners.
- Refreshments, hot and cold.
- Awards to 1st three finishers, male and female, in 4.4-mile race and 2.2-mile "Wimp-Out", and to top three, male and female, in 4.4 miler in 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, and 80+ age groups, plus Kay Guere Memorial award to 1st 60+ female.
- Questions? Call Race Director Rick Vertucci at 857-9025.

Please mail with check payable to FMRRRC to FMRRRC, c/o ARE Event Productions, PO Box 38195, Albany, NY 12203.

Check here if you are an FMRRRC member.      Check if running       4.4 Mile       2.2 Mile

Check here if you'd like to become an FMRRRC member and save \$2 on this and other club races, and also receive the club's newsletter and other benefits of membership. Memberships are \$10 for students, \$18 for individuals, \$20 for couples, and \$25 for families. Please enclose a completed membership application (available at [www.fmrrc.org](http://www.fmrrc.org)) and separate checks for new memberships.

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Sex \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Waiver of Liability and Statement of Fitness: In consideration of my entry, I hereby for myself, heirs, executors and assigns, waive any and all claims against the Fulmont Roadrunners Club, Road Runners Club of America, the Hagaman Volunteer Fire Department, and all officials and volunteers in this race for any injury or illness which may directly or indirectly result from my participation. I further state that I am in proper physical condition to participate in this event. I hereby grant permission for the free use of my name and photos or any other record of my participation for publicity purposes.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or guardian signature (if under 18) \_\_\_\_\_