



# FALL 2017 DEVELOPMENTAL CROSS COUNTRY RACES

For more information:

Call: (862) 881-2216

Email: NJSTRIDERS@Yahoo.com

Web: NJStriders.com

PO Box 254 • Haworth, NJ 07641

Sanctioned by



## DATES

Registration is 45 min before start time.  
Course Walk is 30 min before start time.

**September 24, Sunday**  
9:30 Start Time

**October 8, Sunday**  
9:30 Start Time

**October 22, Sunday**  
9:30 Start Time

## SITE

**Mahwah High School**  
*By Baseball Field / Track*

Directions:

From Route 17 north:

Exit at West Ramapo Ave/ Pomptom Lakes / Mahwah. Proceed over bridge, left at stop sign. High School is at the top of the hill.

From Route 287 north:

Take to Route 17 South. Exit West Ramapo Ave. High School is at the top of the hill.

## ORDER OF EVENTS

AGE GROUPS	DISTANCE
Sub-Bantam born 2010-2009	1500 Meters
Bantam born 2008-2007	3km
Midget born 2006-2005	3km
Youth born 2004-2003	4km

*Bantam and Midget races may be combined for time/participation limits but scored separately.*

## TEAM/INDIVIDUAL ENTRIES

Please send email to NJSTRIDERS@yahoo.com  
With Athletes Name, Date of Birth, Gender  
and Team Name

## ENTRY

All NJ Striders \$6.00  
All non-members \$7.00

## WAIVER

All entrants under 18 must have a parent or guardian (not Coach or relative) sign the waiver below. Bring the waiver to your first meet or send to: NJ Striders, P.O. Box 254, Haworth, NJ 07641

## AWARDS

Medals to top 3 in all events. Ribbons to all finishers.

### 2017 NEW JERSEY STRIDERS DEVELOPMENTAL CROSS COUNTRY - ATHLETES WAIVER

In consideration of my entry being accepted, I, intending to be legally bound to hereby for myself, my heirs, assigns, and representatives, waive release and forever discharge any and all rights for claims and damages which I may have, or which may hereafter accrue to me against The New Jersey Striders Track Club, Inc. (a nonprofit organization), USA Track & Field / New Jersey Association, Mahwah High School, Mahwah Board of Education, Town of Mahwah or their respective officers, agents or representatives, successors and/or assigns, for any and all damages which may be sustained and suffered by me in connection with my association with or entry in and for arising out of my travel to, participation in, returning from any race of meet in this 2017 New Jersey Striders Cross Country Series. I certify the physical fitness necessary to compete and withdraw if there is not that level of fitness.

Last Name \_\_\_\_\_ M F USATF No. (OPTIONAL) \_\_\_\_\_

Exact Name of USATF Club - otherwise put unattached \_\_\_\_\_ Area Code & Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ Street \_\_\_\_\_ Include Apt. No. and/or C/O \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County of Residence \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ If Under 18 - Signature of Parent (Not Coach) \_\_\_\_\_ Date \_\_\_\_\_