



SUNDAY, APRIL 14, 2019

Race starts at 9:00 AM

Rain or Shine

Building 14 - JFK Airport

Subject to Airport Security

Registration/sign-in starts at 7:00am & ends at 8:15am; Last bus leaves for starting line at 8:40am

JFK Rotary Club's 5K Runway Run

Bud Hening Memorial Run at JFK International Airport, Jamaica, NY

For information, FAQs, travel directions, and more, please visit : www.JFKRotaryClub.org

- **OPEN TO ALL CATEGORIES and AGE GROUPS**
- **Walking is fine. NO STROLLERS ALLOWED in race.**
- **FREE PARKING & BAG CHECK**
- **Registration entry includes Dry Fit T-shirt (if registered by April 4th), personalized bib, and refreshments**
- **T-shirts after April 4th registration are subject to availability based on first come, first serve on day of race.**
- **PACKETS TO BE PICKED UP ON DAY OF RACE**
- **Race starts and ends at Building 14 in JFK Airport**
- **QUESTIONS? E-mail: INFO@JFKRotaryClub.org or visit: www.JFKRotaryClub.org**

CATEGORIES, DEADLINES, AND AWARDS

- **Medals: Top 3 Male and Female finishers in 5-year age groups. Wheelchair included.**
- **Prefer to register online? Link is on our website. ONLINE REGISTRATION CLOSES at 11:59 pm on APRIL 9th, 2019**
- **POSTAL MAIL REGISTRATION: Must be POSTMARKED NO LATER than APRIL 4th, 2019**
- **REGISTRATION FEES (postmark or pay dates): Adults: Jan 1-Feb 28, \$30; Mar 1-31, \$35; Apr 1-9, \$40. Students 18 & under, \$20. Virtual runners & day of race registration for all runners: \$40**
- **Come join us at awards ceremony after the end of race.**
- **ALL PARTICIPANTS ARE AUTOMATICALLY ENTERED IN A SPECIAL DRAWING FOR ROUND TRIP AIRLINE TICKETS**

Make checks payable to: **JFK ROTARY CLUB** or enter Credit Card information below:



Expiration:
Mo. _____
Yr. _____

CARD NUMBER

SECURITY CODE

Mail Registration Form to: **JFK Rotary Club, P.O. Box 301279, JFK Airport, Jamaica, New York 11430**

First Name _____ Last Name _____ Age (race day) _____ Male Female

Address _____ City _____ State _____ Zip _____

Date of Birth: ___ / ___ / ___ T-shirt size: (Circle) S / M / L / XL Wheelchair Physically Challenged Walker (cane/etc.)

Email: _____ Phone (____) _____

I, the undersigned, intending to be legally bound hereby, for myself, my heirs, executors and administrators, hereby waive, release and hold harmless Race Organizer, Race Director, all sponsors, Rotary International, The Port Authority of NY/NJ, The City of New York and their agents, employees, representatives, successors and assigns, from any and all liabilities, claims, demands and causes of action whatsoever arising directly or indirectly from my participation in this event, even if any such liabilities, claims, demands and causes of action arise in whole or in part out of the negligence of any of the above mentioned organizations or individuals. If signed by a parent or guardian, the parent or guardian agrees to waive, release and hold harmless the above mentioned organizations and individuals from any and all said liabilities, claims and causes of action which may be asserted on behalf of the entrant. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed medical doctor. Further, I hereby grant permission to any and all of the above mentioned organizations and individuals to use any photographs, videotapes, motion pictures, recordings or any other record of this event and my participation in this event for any purpose whatsoever.

X _____ X _____
Participant's Signature Parent or Guardian (if applicable)

(When filling this form, please write/print clearly. Thank you.)