

16TH ANNUAL SOMERS GREAT ESCAPE

5K & 5-MILE

SATURDAY, SEPTEMBER 19TH, 2015



START TIME
8:00AM

2 VISION BLVD
SOMERS, CT

ROAD RACE

Race Amenities

- Free Beverage at Rotary Pavilion!
- Iconic T-Shirt & Personalized Bib*
- *Must Register by 8/31
- 4-Town Fair Parade

Course Information

- 5k & 5-Mile USATF Certified
- Closed to Vehicle Traffic
- Both Races are Digitally Timed
- Course Hydration Stations

Awards and Recognition

- Finisher Medals
- Awards to Overall Top-3 M&W
- Awards to Age Division Winners

* **Online Registration:** www.SomersGreatEscape.com

* **Email:** Scott@SNEAA.org

ONLINE ENTRY ENCOURAGED

5k Race (Race Start at 8:00am)

Postmarked on/before Sept 14..... \$20.00
RACE DAY FEE..... \$25.00

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

Age on Race Day: _____ Gender: **F** **M**

Email: _____

Phone: _____

Shirt Size: S M L XL

Entry Fee Enclosed: \$ _____

5-Mile (Race Start at 8:00am)

Postmarked on/before Sept 14..... \$20.00
RACE DAY FEE..... \$25.00

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

Age on Race Day: _____ Gender: **F** **M**

Email: _____

Phone: _____

Shirt Size: S M L XL

Entry Fee Enclosed: \$ _____

Make Check Payable and Mail To: Somers Rotary Club, P.O. Box #2, Somers, CT 06071

IMPORTANT: NO REFUNDS.

Liability and Publicity Release: *Failure to sign and date will delay your application.*

Please accept my entry in the Great Escape. I hereby state that I have conditioned myself to participate in the event I have chosen. I, for myself, my executors, administrators and assignees, do hereby release and discharge the Great Escape, Somers Rotary, Somers Educational Foundation, Town of Somers, Southern New England Athletic Association, officials, sponsors, vendors and volunteers from damages of injuries occasioned by my participation in the Great Escape races. I also authorize the Great Escape officials to utilize any photographs, video, and audio tape of my participation in the events for any and all purposes. By signing my name below, I certify that I have read all the terms and conditions of this release and do intend to be legally bound thereby.

Signature (Parent if athlete is under 18 years old): _____ Date: _____

In case of Emergency, please notify: _____ Phone: _____