

Codfish Bowl

Cross Country Races

Saturday, September 27, 2008

Franklin Park, Boston



Women's 5K - 11:00 a.m.

Men's 8K - 11:30 noon

The season's first open meet for all level of teams at Franklin Park
The standard 5K and 8K courses will be utilized

Fee: Teams: \$80 per team for up to 8 runners
\$5/runner over 8 runners (separate men & women fees)
Individuals/unattached: \$10
USATF membership required of all non-collegiate runners
Cash, or check to "USATF-NE". All fees due on race day

Entries: Colleges: Submit rosters via email in a plain text file to
Office@usatfne.org
Deadline: Thursday, September 25, 5 p.m.
Van parking passes: please request by Sep. 22, to be mailed
(Pass needed to park inside gates along finish.)
Clubs: Submit rosters or individual entry forms
All entrants must complete and sign a waiver
Individuals: Submit form and fee in advance (preferred)
Limited day of event entry

Awards: Plaques to top teams, awards to top 7 individual finishers

Run with the cooperation of the Boston Parks Dept

Questions ? office@usatfne.org - 617-566-7600

**Codfish Bowl -- Franklin Park, Boston
Saturday, September 27th, 2008**

ENTRY FORM

Last Name: _____ First Name: _____

Address: _____ City/State/ZIP: _____

Age on September 27 _____ Gender: M / F

Email: _____

Club Name: _____

USATF Membership #: _____ (required for club/unattached runners)

Assumption of Risk: I recognize that cross country running is a potentially hazardous activity. In exchange for acceptance of this entry, I for myself, my executors, administrators and assigns, do hereby release any rights and claims for damages I may have against USATF, USATF-New England, the City of Boston, and any and all sponsors and individuals involved with the presentation and conduct of the Codfish Bowl. I hereby attest that I have full knowledge of the risk involved in running in this race, and I am physically fit and sufficiently trained to participate in this race. No one may run with a dog, nor may any runner wear headphones. USATF rules apply.

As a coach of a college team, I verify that my runners are aware of risks of cross country and are sufficiently trained to compete in this race

Signature: _____ Date: _____

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ENTRY FORM / WAIVER

Last Name: _____ First Name: _____

Address: _____ City/State/ZIP: _____

Age on September 27 _____ Gender: M / F

Email: _____

Club Name: _____

USATF Membership #: _____ (required for club/unattached runners)

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