



SUNDAY, DECEMBER 11TH, 2016 @ 8:30 AM

**RAYNHAM MIDDLE SCHOOL
420 Titicut Rd. Raynham, MA**

- * *Awesome post-race hot breakfast*
- * *Medals to all finishers. (3-hour time limit)*
- * *Winter hat to all runners registered by 11/18/2016*
- * *Register below or online at http://TBD_lightbox_link.COM*

COURSE:

Race starts and ends at the Raynham Middle School, 420 Titicut Rd.
<http://www.mapmyrun.com/routes/fullscreen/541071218/> (*subject to change)

PRIZES:

Top 3 M/F Overall; Top 3 M/F in age groups 0-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

POST RACE:

Post-race hot breakfast will be served inside the Raynham Middle School. Breakfast is free for all runners. Non-runners can enjoy the breakfast for \$5. (Kids under 12 are free).

INFORMATION:

Registration fees are non-refundable. The race is on rain, snow or shine.

For more details visit <http://colonialrunners.org/events/club-sponsored-races/frostyhalf/>, or email FrostyHalf@colonialrunners.org.



Entry Form – 2016 Frosty Half Marathon

FEE: \$55 early registration; price increases to \$60 on 11/1, \$65 on 12/1 ****NO RACE DAY REGISTRATION****
(*\$5 discount for CRR members*)

SEND TO: Colonial Road Runners
PO Box 2222, Abington, MA 02351
(*Make checks payable to Colonial Road Runners*)

Name (print clearly) _____ M/F _____ Age on 12/10/16 _____

Street _____ City/Town _____ State _____ Zip _____

Telephone _____ E-Mail _____

Emergency Contact Name _____ Telephone _____

RELEASE AND WAIVER: I assume all risk associated with running in this event. In consideration of your accepting into this entry, I hereby for myself and my heirs, executors, or administrators waive and release all rights and claims or damages I may have against Colonial Road Runners, the Town of Raynham, Raynham Middle School, any sponsors, all race officials and volunteers, and or any other individuals or organizations associated with this event, for any death, personal injury, or property damage arising from or in the course of my participation in this event.

Signature (Parent/Guardian if under 18) _____ Date _____