

Sunday, November 2, 2014 Canal Parkway -- Cumberland, Maryland PRESENTED BY T.R.A.C. SERVICES, LLC

Supporting Bishop Walsh Athletic Association (BWAA) -- Cross Country & Track Teams

Support	ing bishop waish remede risso.	nation (BWILI) G1033	Country & Track reams
THE COURSE:	Half marathon is an out and back course on the Great Allegheny Passage (G.A.P.) Soft surface trail with a slight incline in the first 6 miles and a 3% descending grade in the second half. Race starts and finishes at Canal Place. Four hour time limit (race cutoff time is 12 Noon). NOTE: Relay teams must provide own transportation to Cash Valley Road and walk to split point.		
TIME:	Half – 8:00am start; Packet pick up will be held the morning of the race from 6:30am to 7:30am. Packet must be picked up by 7:30am; no race day registration.		
RUNNERS:	Runners will receive a race shirt, aid station support, post-race food, and finisher's medal.		
AWARDS:	Cash prize for overall female and male solo finishers, and top relay team. Awards given to the top three finishing solo runners for both genders in the following age groups: 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60 & over		
ENTRY FEE:	Solo Runners \$45 up thru August 31; \$60 Sept. 1 – Oct. 7; \$75 Oct. 8 – Oct. 31. 2 Person Relay Teams – \$80 up thru August 31; \$110 Sept. 1 – Oct. 7; \$150 Oct. 8 – Oct. 31. Registration must be received by Friday, October 31 st . No refunds given after Sept. 30.		
REGISTRATION:	Checks payable to T.R.A.C. Services, LLC; Mail to 11901 Aster Avenue, Cumberland, Maryland, 21502 – online registration at www.active.com .		
QUESTIONS:	smcquade2040@yahoo.com; 301-	729-4737; <u>www.tracservice</u>	sllc.com.
Name (relay teams prov	vide both runners' names and a team	name):	
Age on 11/2/14 (solo	os only): Gender	(circle one): Female/Male	e (info not needed for teams)
	p: Phone:		
State:Zij	p: Phone:		
Email address:			
Shirt size (circle one or	r two sizes for relay teams): Adult	: S M L XL	Youth: S M L
I am medically able and prohealth, and I am properly to event, including the right of of the race and agree to able with other participants, the risks being known and appropriate appropriate and accepting my entry, I, for mand volunteers of Western C&O Canal Authority, Gresponsors, their representative though that liability may arrof the foregoing to use my properly the specific and properly and the specific and the spec	race is potentially hazardous activity, who operly trained, and by my signature, I cerained. I agree to abide by any decision of any official to deny or suspend my particle by them. I assume all risks associated effects of the weather, including high heciated by me. I understand that bicycles I will abide by all race rules. Having remyself and anyone entitled to act on my learn Maryland Highlands Half, the City of Ceat Allegheny Passage Authority, Marylaves and successors from all claims or liable out of negligence or carelessness on the obotographs, motion pictures, recordings	rtify that I am medically able of a race official relative to a cipation for any reason whatso with running in this event, increat and/or humidity, traffic are, skateboards, baby joggers, road this waiver and knowing the behalf, waive and release the Toumberland, Bishop Walsh Schand State Police, and the Road collities of any kind arising out the part of the persons named in or any other record of this even	to perform this event, and am in good any aspect of my participation in this oever. I attest that I have read the rules cluding but no limited to: falls, contact and the conditions of the road, all such aller skates or roller blades, animals are hese facts and inconsideration of your F.R.A.C. Services, LLC, race directors hool and the BWAA, Canal Parkway, d Runners Club of America, all event of my participation in this event, even this waiver. I grant permission to all nt for any legitimate purpose.
Signature (need both relay	y members):		Date:
Parent's Signature if under 18 year:			Date: