

Run For Recovery

2-mile relay race ~ 4-person teams

NYS Empire State Plaza, Albany, NY

September 18, 2007 ~ 12:00 - 2:00 p.m.

Join us for the Festivities



For providers of addiction services & NYS agencies

Online Registration at
www.oasas.state.ny.us

Registration Closes on 9/14/06 @5:00 P.M.

No onsite registration

Every runner is rewarded

No entrance fee

FOR MORE INFORMATION

NYS OASAS

518-485-1768

www.oasas.state.ny.us

communications@oasas.state.ny.us

For directions and parking information go to www.ogs.state.ny.us/parking

AWARDS

- * Commissioner's Cup awarded for 1st place provider team & 1st place agency team
- * Best Team t-shirt
submit t-shirt to the registration table for display and judging

FEATURES

- * After race refreshments for runners and walkers
- * Live music by The Foy Brothers
- * Register a team to run or walk, or plan to join us for the festivities.

Captains Instructions Register online at www.oasas.state.ny.us

- * Teams should arrive at the Empire State Plaza before 12:00 noon.
- * Submit your team t-shirt for judging and display to the registration table (optional).
- * Have **each** member of your team sign the waiver.
- * Bring the signed waiver to the registration table and receive your team packet.
- * Make sure each runner knows the order they will be running.
- * There will be no tagging or passing a baton. The next runner leaves the start when the previous runner crosses the finish line.
- * 1st-4th runners pin the ribbons provided in the team packet to their left shoulder, (pins will be provided):
 - red - 1st runner
 - green - 2nd runner
 - blue - 3rd runner
 - yellow - 4th runner
- * Captains are responsible to record the clock time of each member on the results card, and return the card to the registration table immediately upon finishing.

New York State
Office of Alcoholism and Substance Abuse Services
4th Annual Run for Recovery
September 18, 2007
Waiver

After careful consideration, I sign my name to confirm that: (1) I have read and understand this statement; (2) I have determined and decided that I have no physical condition which would impair my ability to safely participate and that I am physically able and fit to participate in this athletic event; (4) I understand that I may injure myself or be injured in this athletic event; and (5) I knowingly and intentionally release the State of New York, the Office of Alcoholism and Substance Abuse Services, and any and all persons connected with this athletic event from any claim, cost, award or expense whatsoever for any injury or claim arising out of my participation in this athletic event.

Print Name

Signature & Date
