

# USATF New England Trail running championships

10.3 Kilometer Trail / Mountain  
Race with 1,204' climb/descent.

June 13, 2009 – 9:00 am

Northfield Mountain Visitors Center  
99 Millers Falls rd. Northfield, MA

Pre-entry: **\$10** Checks payable to Dave Dunham. Send to 108 Ferry Rd, Bradford MA 01835

Race day: **\$15** Registration 7:45 AM - 8:30 AM. (WMAC/GCS/WMM Members - \$2 off on Pre-registration only).

**Part of the Inov-8 USATF NE Mountain running series** – [www.usatfne.org/trail](http://www.usatfne.org/trail)

Wachusett Mountain - May 23, 2009 - [www.cmsrun.org](http://www.cmsrun.org)

Pack Monadnock - May 31, 2009 -

Mount Cranmore - June 28, 2009 - [www.whitemountainmilers.com](http://www.whitemountainmilers.com)

Loon Mountain - July 5, 2009 - [www.whitemountainmilers.com](http://www.whitemountainmilers.com)

Mount Ascutney - July 11, 2009

**Also part of the WMAC "Grand Tree" trail series** – [www.runwmac.com](http://www.runwmac.com)



**Questions:** [dave.dunham@comcast.net](mailto:dave.dunham@comcast.net) or 978-474-9745 (6am- 2pm Mon-Fri)

-----**Cut Here and Mail with entry fee to: Dave Dunham 108 Ferry Rd Bradford MA 01835**-----

Waiver: I understand that running a race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in the event including, but not limited to: falls, contact with other participants, the effects of weather, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of acceptance of my entry: I hereby, myself, my heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against Northfield Mountain, USA track and Field, Dave Dunham, race sponsors, their agents, representatives, successors, and assign for any and all injuries suffered by me on the way to take part in the race, during the race, and leaving the scene of the race. I ASSUME ALL RISKS ASSOCIATED WITH THIS EVENT. The use of headphones and/or baby strollers is strictly forbidden.

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Club or Team (if any) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_