



2021 BorgWarner

CORTLAND COUNTY FAMILY YMCA RACE SERIES

22 Tompkins Street, Cortland NY 13045 607-756-2893 www.cortlandymca.org

SAVE now and sign up for all 6 races of the series!

___ Mother's Day Run 5K Saturday May 8, 2021	9 AM Reg by 4/19 to receive shirt
___ Father's Day Run 5k Sunday, June 20, 2021	9 AM Reg by 6/1 to receive shirt
___ Rock Around the Block 5K Sunday, August 15, 2021	9 AM Reg by 7/26 to receive shirt
___ Chiro 5K Saturday Sept. 25, 2021	5 PM Reg by 9/7 to receive shirt
___ Halloween Pumpkin Run 5k October 23, 2021	9 AM Reg by 10/5 to receive shirt
___ Turkey Trot 5K Thursday November 25, 2021	9 AM Reg by 11/4 to receive shirt

Please select your projected finish time:

___ 20 Minutes or less ___ 21-25 Minutes ___ 26-30 Minutes ___ 31-35 Minutes ___ 36-45 Minutes
 ___ 45+ Minutes ___ Running as a family

<input type="checkbox"/> Adult \$25	RACE DAY Race Day Registrations Closed For 2021
<input type="checkbox"/> Youth \$20 (13 and under)	
<input type="checkbox"/> Borg Warner Employee/family member	
<input type="checkbox"/> Save money! <i>6 races for the cost of 5!</i> <input type="checkbox"/> All 6 Races \$125 Adult (sign up must be by 1 st race, 5/7/21) <input type="checkbox"/> All 6 Races \$100 Youth (sign up must be by 1 st race, 5/7/21) <input type="checkbox"/> Borg Warner all 6 Races	

Make checks payable to "Cortland YMCA." We also accept cash, MC, Visa, Discover, AMEX

Do you wish to make an extra donation to YMCA? If so, please indicate amount \$ _____

Last Name											First										
Address																Gender					
City											State		Zip						Age		
Phone						T Shirt Size	Adult Sizes: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL					DOB	__ / __ / __								
E Mail																					

In consideration of acceptance of this entry, I, the undersigned, intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Cortland YMCA and other sponsors of this event, their representatives and successors for any/all injuries suffered by me in this event. I attest and verify that I am physically fit and have trained sufficiently for this event and my physical condition has been verified by a licensed medical doctor. Further I hereby grant full permission for the use of any photographs, videotapes, pictures, recording or any other record of this event for legitimate purpose.

Signature: _____ Date: _____

Signature of Parent/Guardian (if under age of 18): _____

Credit Card Info ___ Visa ___ MasterCard ___ Discover ___ Amer ___ Signature _____

Exp ___ / ___ Name on Card _____ CVC# _____