

## Directions to the Start:

### Manorhaven Blvd., PW

From the Long Island Expressway, Exit 36: Go north approximately 4 miles to Main St., Port Washington. Turn left. Take Main St. to Shore Rd. Turn right. Take Shore Road to Manorhaven Blvd. Turn left. Start is adjacent to Manorhaven Park-- approximately 1/4 mile on left.

## Parking

Participants are urged to carpool, arrive early and park in Soundview Marketplace (on Shore Road) or Sousa & Manorhaven elementary school parking lots where there is free parking. Manorhaven Park parking lot closes at 7:30AM or whenever the lot is full. Local roads close at 8AM.

## Food Pantry Donations

At race packet pick up participants are encouraged to donate items and gift cards to the **Our Lady of Fatima** food pantry. Preferred items include unexpired cereal, cooking oil, peanut butter, jelly, pasta sauce and canned tuna. Local area grocery store gift cards or prepaid credit cards are suggested.

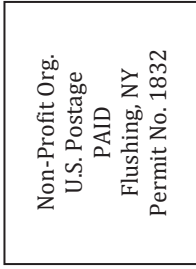
## The Community Chest of Port Washington

All proceeds from the Port Washington Thanksgiving Day 5 Mile Run go to the Community Chest of Port Washington, a 501 (c) (3) charitable organization dedicated to improving the lives of Port Washington residents. Race fees & contributions are deductible to the extent provided by law.

To learn more about the Community Chest and the charities it supports, contact: [info@portchest.org](mailto:info@portchest.org), (516)767-2121, visit [www.portchest.org](http://www.portchest.org) or become a friend on Facebook .



Community Chest of Port Washington  
382 Main Street  
Port Washington, NY 11050



Or Current Resident

## Sponsorship Opportunities

Please contact the Community Chest at  
(516) 767-2121 or [info@portchest.org](mailto:info@portchest.org) for information  
about becoming a Sponsor of the  
2014 Port Washington Thanksgiving Day Run.

THE  
COMMUNITY  
CHEST OF  
PORT  
WASHINGTON



&  
THE TOWN OF  
NORTH  
HEMPSTEAD

# PORT WASHINGTON THANKSGIVING DAY

## 5 MILE RUN

Sanctioned & Certified by USATF

Benefiting the  
Community Chest  
of Port Washington

Thanksgiving Day  
Thursday, November 27, 2014  
8:30AM

Start: Manorhaven Boulevard  
Port Washington, NY  
(adjacent to Manorhaven Park)

# Registration Procedures

## By Mail

Complete the application form at right and mail it with your check (no cash), payable to the *Community Chest of Port Washington*. Mail to:

Community Chest of Port Washington  
382 Main Street  
Port Washington, NY 11050

Fees: Adults - \$35; Ages 9 – 21 - \$25

\*\*Deadline: Must be received by 11/24/14\*\*

## Walk in prior to 11/25/14

Walk in applications between 10AM-3PM:  
Community Chest of Port Washington,  
382 Main Street, Ste 110, Port Washington

Fees: Adults \$35; Ages 9 – 21 \$25

## Online

Visit [www.portchest.org](http://www.portchest.org) and click on the link to register online at Active.com. If you are under 18 your parent/guardian must register for you.

Fees: Prior to 11/25/14: Adults \$35; Ages 9 – 21 \$25  
(Active.com charges a processing fee per registrant)

Deadline: 9PM November 24, 2014



## LATE REGISTRATION IN PERSON ONLY

**Fees: Adult - \$50; Ages 9 – 21 - \$35**

Tues., 11/25 5-8 PM at Race Packet Pick Up  
Wed., 11/26 5-9 PM at Race Packet Pick Up  
Thurs., 11/27 7-8 AM on Race Day

## Race Guidelines

- Race is capped at 3,000 participants.
- Each athlete must complete a separate application.
- Fee is non-refundable and non-transferable.
- Minimum age is 9. Children under 11 must be accompanied by an adult.
- For the safety of all, **BABY STROLLERS, JOGGERS, SKATEBOARDS, BICYCLES and DOGS** are **NOT** permitted.
- For safety reasons, walkers and slower runners should NOT line up in the front.

## Award Categories

Top three athletes overall, Male/Female in each age group & wheelchair. Age Groups: 9-12, 13-15, 16-19, 5 year age breaks to 79, 80+.

There will be no duplication of awards. Awards are pick-up only. They will NOT be mailed.

## Timing and Results

Timing and Results will be calculated by Finish Line Road Race Technicians (FLRRT). Results will be posted at [www.FLRRT.com](http://www.FLRRT.com).

## Race Packet Pick Up

Race Packet includes T-shirt & Race Bib. Pick up at:

*Port Washington Senior Citizens Center*  
80 Manorhaven Boulevard, Port Washington, NY

Tuesday	Wednesday	Thursday
11/25	11/26	11/27
5-8PM	5-9PM	7-8AM

**\*\*\*NEW FOR 2014: FEES ARE HIGHER IF YOU REGISTER DURING RACE PACKET PICK UP.\*\*\***

## T-shirts

All registrants will receive a long-sleeved T-shirt. We make every attempt to provide the size selected when registering, but cannot guarantee size as we pre-order the T-shirts in September.

<b>Registration Form</b>		<b>Port Washington Thanksgiving Day 5 Mile Run, November 27, 2014</b>	
Complete and mail this portion of the registration. Registrations received after 11/24/14 cannot be processed by the office; however, you may register late at Race Packet Pick Up for an additional fee. See instructions for details. In order to receive confirmation of your registration a <b>LEGIBLE &amp; VALID</b> e-mail address must be provided.			
First Name: _____		Last name: _____	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Age (at 11/27/14):	Shirt Size:	Adult S <input type="checkbox"/> Adult M <input type="checkbox"/> Adult L <input type="checkbox"/> Adult XL <input type="checkbox"/>
Address: _____		_____	
City:	State:	Zip:	_____
Home Phone: ( ) ( ) _____	Entry Fee: <input type="checkbox"/> Adults: \$35 <input type="checkbox"/> Ages 9- 21: \$25 <input type="checkbox"/> Wheelchair \$ _____		
Cell Phone: ( ) ( ) _____	<b>Additional Donation to the Community Chest (optional)</b>		<b>\$ _____</b>
Email: _____	Total Enclosed		\$ _____
Please fill out entry blank, read the following statement and sign below. In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, my executors and administrators acknowledge and agree that I am voluntarily and knowingly assuming all risks and injuries which are inherent in or which may arise from my voluntary participation in this event. I further hereby knowingly and voluntarily waive and release any and all rights and claims for damages that I have or may ever have against the Community Chest of Port Washington, the Port Washington, Sands Point and Nassau County Police Departments, the Port Washington Fire Department, the County of Nassau, the Town of North Hempstead, Finish Line Road Race Technicians, Inc., the Villages of Manorhaven, Sands Point, Baxter Estates and Port Washington North, all event sponsors, officers, agents and employees of all of the above for all injuries or damages suffered by me arising from or caused by my participation in said event. I attest and verify that I am physically fit and have sufficiently trained for the completion of the event and that my physical condition has been verified by a licensed Medical Doctor. Further, I hereby grant permission to use, and release said rights to any photographs, videotapes, motion pictures, recordings or any other record of this event for any purpose whatsoever, and understand that I will receive no compensation of any form in connection therewith.			
Signature: _____			Date: _____ if you are under 18, a parent or guardian must sign for you.