AFTER THE LEAVES HAVE FALLEN JOSH FELDT MEMORIAL RUN

Half Marathon (13.1 miles) Carriage Trail Race

Sponsored by the Shawangunk Runners and Minnewaska State Park Preserve Spectacular Scenic Course on Carriage Trails

11 a.m. Sunday, November 13, 2015

Location: Minnewaska State Park Preserve, Route 44/55, Gardiner, NY.

<u>Course:</u> Starting near the Upper Minnewaska Parking Lot you head clockwise around Lake Minnewaska on (red-trail) towards the picnic area. You make a small loop and head back towards the start line. You head down the hill and onto the green trail heading towards Lake Awosting. Take the black trail around Lake Awosting counter clockwise. Up and over Castle Rock (blue trail) and back to start/finish area by going counter clockwise around Lake Minnewaska (red trail)- carriage trail surface, incredible views, pristine glacial lakes...a truly spectacular course

Registration: begins at 9:30 am. Pre-Registration fee is \$15; Day-of fee is \$25. Make checks payable to **Shawangunk Runners**, and mail to Christopher Regan, 7 Park Ave, Wappingers Falls, NY 12590. The State Park charges a \$10 fee per car. Race is limited to 400 runners and there will be online registration at https://www.zippyreg.com/online_reg/registration.php?eventID=796

** Early start at 10:30am If you expect to take more than 2:45 minutes to finish the course**

<u>Directions:</u> Exit 18 off the NY State Thruway. Make left onto Route 299 and follow to intersection with Route 44/55. Make right onto 44/55; continue approx. 5 miles to Minnewaska State Park, on left.

More information: Steve @ 845-339-5474. www.shawangunkrunners.com

In consideration of accepting this entry, I, intending to be legally bound for myself, heirs, administrators and executors waive and release any and all rights and claims for damages I may have against the organizers, sponsors and the Shawangunk Runners, the People of the State of NY, NY State Executive Department, Office of Parks, Recreation and Historic Preservation, Palisades Inter State Park Commission, their Commissioners, officers, agents, and employees for any and all injuries suffered by me in this event. I attest and verify that I am physically fit and have trained sufficiently for this event. I understand that the carriage roads are mainly shale surfaced and moderate in grade and present varying degrees of difficulty, and that they may parallel cliffs, ravines and other natural hazards.

NAME:	PHONE:
ADDRESS:	
GENDER: M F DATE OF BIRTH://	EARLY START: Y N
EMAIL:	
SIGNATURE(Parent or Guardian signature if under 18)	DATE