



## Team Application

# The Saratoga Palio: Melanie Merola O'Donnell Memorial Race Half Marathon and 5K Run/Walk - September 19, 2010

**Mail to:** The Melanie Foundation, Inc., Attn: Maria Maurer  
PO Box 4666  
Saratoga Springs, NY 12866

Team Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### Please indicate your teams' category

- All Female       All Male       3 women / 2 men       3 men / 2 women

### Team Instructions

Below, please write **legibly** the names, sex, and age of the runners who will participate on your team. You may list up to seven runners, with five counting towards scoring. The lowest combined time wins in each category listed above.

**Note:** Each participant must be individually registered prior to or with this team application. If we receive this form with a name not in our entry listing, they will not be placed on the team. There is no additional fee for a team.

| OFFICIAL USE ONLY | FIRST NAME | LAST NAME | AGE (on race day) | SEX |
|-------------------|------------|-----------|-------------------|-----|
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### Waiver must be read and signed before mailing:

I know that running is a potentially hazardous activity. I should not enter or run this event 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 this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release the event, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. All fees are nonrefundable.

Signature (The team contact person must be at least 18 years old.

Date