

LAWRENCE & MEMORIAL HOSPITAL PRESENTS...

Free T-shirt if
registration is delivered/
postmarked by April 10th!



the Twenty-Second Annual **SPRING STRIDE 2009**

A 3.5 Mile Road Race held in New London, CT
Proceeds to benefit Lawrence & Memorial Hospital

Saturday, May 2 at 10 a.m. • Entry Fee: \$15 in advance, \$20 day of race

- Spring Stride will be held rain or shine!
- Registration forms must be postmarked or delivered by Friday, April 24, otherwise, participants need to register the day of the race...no exceptions!
- Registration and CHIP pick-up will be held from 8:30 to 9:30 a.m. on event day at the registration tent across from L&M's main entrance on Montauk Avenue in New London.
- NO entries accepted after 9:30 a.m.!
- The easy to follow course is considered flat and fast.
- CHIP Timing by Platt Systems.

- NO PETS allowed for safety reasons.
- Merchandise prizes to top finishers in each category based on number of entries in each category.
- Walker prizes presented on a raffle basis.
- Post-race refreshments and special prize drawings for all entrants.

DIRECTIONS TO THE RACE: From I-95, take New London Frontage Road to Colman Street Exit. Left off exit ramp. Follow 2.5 miles to end. Left on Bank Street. Right at 2nd light onto Montauk Avenue. Hospital parking lot is 1 mile ahead on left.

REGISTRATION FORM YOU MUST COMPLETE ENTIRE REGISTRATION FORM, INCLUDING YOUR BIRTHDATE! OTHERWISE YOU WILL NOT BE REGISTERED!

Name _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Birthdate ____ / ____ / ____

(Can't register without Birthdate!)

(Age for timing purposes only!)

T-shirt Size (check one) S M L XL

Club/Team Affiliation _____

I will be participating as a Runner Walker

RUNNERS ONLY

Please indicate the division in which you will be competing:

MEN

- | | |
|---|---|
| <input type="checkbox"/> Junior (MJR) 19 & under | <input type="checkbox"/> Open (MO) 20-29 |
| <input type="checkbox"/> SubMaster (MSM) 30-39 | <input type="checkbox"/> Master (MM) 40-49 |
| <input type="checkbox"/> Grand Master (MGM) 50-59 | <input type="checkbox"/> Veteran (MV) 60 & up |

WOMEN

- | | |
|---|---|
| <input type="checkbox"/> Junior (WJR) 19 & under | <input type="checkbox"/> Open (WO) 20-29 |
| <input type="checkbox"/> SubMaster (WSM) 30-39 | <input type="checkbox"/> Master (WM) 40-49 |
| <input type="checkbox"/> Grand Master (WGM) 50-59 | <input type="checkbox"/> Veteran (WV) 60 & up |

I agree to assume all responsibility for all risk of damage or injury that may occur to me as a participant in this event. As a condition of the acceptance of my entry, I hereby for myself, my heirs, executors and administrators, waive and release Lawrence & Memorial Hospital, the organizing committee, the City of New London, the sponsors and their representatives and employees for any injuries suffered by me while competing in or traveling to or from the event described in this entry application. I certify that I have properly trained for and, to the best of my knowledge, am physically fit for this run/walk.

Detach registration form and return with payment (checks payable to L&M Hospital) to the Public Relations Department or mail to:

Signature of participant required _____

Date _____

Parent or guardian's signature
if applicant is under 18 _____

**LAWRENCE
& MEMORIAL
HOSPITAL**



Spring Stride
Lawrence & Memorial Hospital
365 Montauk Avenue
New London, CT 06320

For more information, please call (860) 442-0711 ext. 2027.