



# FALL 2020 DEVELOPMENTAL CROSS COUNTRY RACES

For more information:

Call: (862) 881-2216

Email: NJSTRIDERS@Yahoo.com

Web: NJStriders.com

PO Box 254 • Haworth, NJ 07641

Sanctioned by



## DATES

Registration is 45 min before start time.  
Course Walk is 30 min before start time.

**September 27, Sunday: 9:30 Start Time**

**October 11, Sunday: 9:30 Start Time**

**October 25, Sunday: 9:30 Start Time**

## SITE

**Mahwah High School**  
By Baseball Field / Track

Directions:

From Route 17 north:

Exit at West Ramapo Ave/ Pomptom Lakes / Mahwah. Proceed over bridge, left at stop sign. High School is at the top of the hill.

From Route 287 north:

Take to Route 17 South. Exit West Ramapo Ave. High School is at the top of the hill.

## ORDER OF EVENTS

AGE GROUPS	DISTANCE
Sub-Bantam born 2012-2013	1500 Meters
Bantam born 2010-2011	3km
Midget born 2008-2009	3km
Youth born 2006-2007	4km
High School Age Fun Run	5km pre-book

For each group: boys run first, girls run 2 minutes after.

## TEAM/INDIVIDUAL ENTRIES

Please send email to NJSTRIDERS@yahoo.com  
With Athletes Name, Date of Birth, Gender  
and Team Name

## PAY ENTRY AT RACE

NJ Striders \$8.00 • Non-members \$10.00  
Please pay by credit card or exact change/cash  
(Teams can pay by check)

## WAIVER

All entrants under 18 must have a parent or guardian (not Coach or relative) sign the waiver below. Bring the waiver to your first meet.

## AWARDS

No awards because of Covid-19

## STOP THE SPREAD

Individuals, including coaches, players and families should stay home if they have tested positive for or are showing Covid – 19 symptoms or have recently had close contact with a person with Covid -19.

## NO CONTACT

We discourage unnecessary physical contact, such as high fives, handshakes, fist bumps or hugs.

## TEMPERATURE CHECK

We will test everyone's temperature at the gate. Anyone who is at 100.4 degrees or higher must leave immediately for the safety of all.

## MASKING OF FACE

EVERYONE on site; athletes, parent, guardian, coaches, officials, must wear a mask at all times except athletes during their race.

Social Distancing of at least 6 feet expected.

## Spectators limited to 1 family member of athletes competing.

Coaches & Parent/Guardian can't be on course prior to or during competition. You may stand on the track or in the football stands or in the flagged spectator box behind Home plate.

Athletes that complete their race will be released by officials & can be picked up next to food stand under the bleachers.

Please use your same race number for all 3 of our meets.

Go to registration behind home plate for your ticket to check in at the starting line.

**PORT-A-JOHNS ARE LOCATED  
BY TENNIS COURTS.  
HAND SANITIZER AVAILABLE AT:  
Port-A- John, registration, & finish line**

## 2020 NEW JERSEY STRIDERS DEVELOPMENTAL CROSS COUNTRY - ATHLETES WAIVER

In consideration of my entry being accepted, I, intending to be legally bound to hereby for myself, my heirs, assigns, and representatives, waive release and forever discharge any and all rights for claims and damages which I may have, or which may hereafter accrue to me against The New Jersey Striders Track Club, Inc. (a nonprofit organization), USA Track & Field / New Jersey Association, Mahwah High School, Mahwah Board of Education, Town of Mahwah or their respective officers, agents or representatives, successors and/or assigns, for any and all damages which may be sustained and suffered by me in connection with my association with or entry in and for arising out of my travel to, participation in, returning from any race of meet in this 2020 New Jersey Striders Cross Country Series. I certify the physical fitness necessary to compete and withdraw if there is not that level of fitness. I understand the risks related to attending and competing in the series. These include, among other risks, the risks due to the coronavirus and other viruses. I accept all risks in order to attend and compete in the series.

Last Name \_\_\_\_\_ M F USATF No. (OPTIONAL) \_\_\_\_\_

Exact Name of USATF Club - otherwise put unattached \_\_\_\_\_ Area Code & Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_ Street \_\_\_\_\_ Include Apt. No. and/or C/O \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County of Residence \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ If Under 18 - Signature of Parent (Not Coach) \_\_\_\_\_ Date \_\_\_\_\_