

City Council
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CITY OF LONG BEACH



City Manager
 Daniel Creighton

**Commissioner of
 Parks & Recreation**
 Joseph A. Brand, Jr.

DEPARTMENT OF PARKS & RECREATION

19th Annual

**City Council
 TURKEY TROT** 

Sunday, November 17, 2024

Day of Race Registration at LBCRS 7:00am-8:30am

One Mile Race begins at 8:30 am

10K (6.2 Miles) Race begins at 9:00 am

REGISTRATION: One Mile Race (for ages 14 & under) \$15.00 in advance or day or race.
 10K Race - Early Registration \$35.00 before November 14 by 3:00pm.
 Day of Race Registration \$45.00 (cash or check) begins at 7:00am at Long Beach Catholic Regional School Gymnasium, 735 West Broadway, Long Beach, NY

REGISTER ONLINE: <https://events.elitefeats.com/lbturkeytrot24>

SEND ENTRIES TO: 19th Annual Turkey Trot
 Long Beach Recreation Department
 700 Magnolia Boulevard
 Long Beach, NY 11561 (Payable to City of Long Beach)

COURSE: Start & finish on New York Avenue and the boardwalk. Accurately measured flat & fast course. Race timing by EliteFeats. *No strollers allowed on race course. *

AWARDS: 1 Mile: Awards to the first three male and female winners in each age category including 10 & under and ages 11-14: 10K Race: Awards to the first three male and female winners in each age category: 14 & under, 15 – 19, 20 – 24, 25 – 29, 30 – 34, 35 – 39, 40 – 44, 45 – 49, 50 – 54, 55 – 59, 60 – 64, 65 – 69, 70 – 74, 75 – 79, 80+; first overall male & female finishers; and first in wheelchair division.

T-SHIRT & NUMBER PICKUP On day of race beginning at 7:00am in the Long Beach Catholic Regional School gymnasium (735 West Broadway).

Please bring a non-perishable food item to benefit those in need in our community.

Long Beach
 Nursing and Rehabilitation Center



For information
www.longbeachny.gov/rec
 or call the Rec Center
 (516) 431-3890

Last Name:		First Name:			<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> NB		
Age on 11/17:	Date of Birth:	Shirt Size (circle one): YS YM YL S M L XL XXL					
Address:		City, State, Zip:					
Email:		Phone:					
<input type="checkbox"/> 10K <input type="checkbox"/> 1Mile		<input type="checkbox"/> Wheelchair User					

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the City of Long Beach, Long Beach Parks and Recreation Department, their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and sufficiently trained for the completion in both the running and swimming segments of this event and my physical condition has been verified by a licensed medical doctor.

SIGNATURE _____

PARENT SIGNATURE _____
 (If under 17 years of age)

FOR RECREATION DEPT. USE ONLY			
RECEIPT # _____	AMOUNT PAID _____	DATE _____	STAFF _____