

# 2nd Annual Race Away Stigma 5K Race & Fun Walk



Help "Race Away" the Stigma that surrounds Mental Health

**October 23, 2010. Saturday**  
 Reg/Package Pick Up Opens @ 8:30AM  
 Race/Walk @ 10:00AM  
 Awards/BBQ Lunch 11:00  
 Hudson Valley Community College  
 80 Vandenberg Avenue  
 Joe Bruno Stadium  
 Troy, New York 12180

Supported with a grant from



Hudson Valley Community College  
 Center for Counseling & Transfer

Project Aware Peer Education Program

\* Syracuse University Athletics

\* Albany River Rats Hockey

\* Tri City Valley Cats Baseball

\* Siena College Athletics

\* Panera Bread Baking Company

\* Brueggers Bagels

\* Pizzeria Uno Chicago Grill

\* Dicks Sporting Goods

\* Price Chopper

\* Road ID

Runners World Magazine

\* Donated Raffle Prizes \*



Mail form and entry fee to:  
 HVCC: Race Away Stigma 5K  
 Counseling and Transfer Office  
 Siek Campus Center Room 260  
 80 Vandenberg Avenue  
 Troy, New York 12180

**Entry Fee: \$17 HMRRC Members; \$20 Non Members**  
 Shirt, Raffle Prizes, Post Race Snacks, and BBQ Chicken Lunch Included.

**Awards to top 3 male/female overall, and 10 year age group category.**

**\$25 Day of Race Registration includes stated above. Shirt based on availability**

Checks Payable to:  
 HVCC Project Aware

Online Registration and Forms:  
[www.hvcc.edu/cct/race.html](http://www.hvcc.edu/cct/race.html)  
[www.active.com](http://www.active.com)

Contact and Questions:  
 Michael Washco, Race Director  
 (518) 629-7176  
[m.washco@hvcc.edu](mailto:m.washco@hvcc.edu)

Name \_\_\_\_\_

Address \_\_\_\_\_

Town/State/Zip \_\_\_\_\_

Shirt Size: S M L XL XXL

Age: \_\_\_\_\_ Sex: \_\_\_\_\_

**Waiver:** In consideration my entry fee and permitting me to attend therein, 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 damage I may now or in the future have, against Hudson Valley Community College, and the sponsors, their representatives, agents, and assignees, for any/all losses and injuries suffered by me in association with this event.

Signature/Date \_\_\_\_\_