

Join us for the fourth annual
Soles for the Harvest
5K and 1 Mile Fun Run.

The loop course starts at the
Cream Ridge Winery, and winds
past horse farms and through
historic Walnford Park in
scenic Cream Ridge, N.J.

Race proceeds this year will
benefit victims of war, at home
(through Wounded Warriors
Project) and abroad (through
ER&D Syria and Yemen Fund).

Runners are also asked to
bring canned goods to benefit a
local food pantry.

Please help us share the harvest!

Soles for the Harvest is sponsored
by Holy Apostles Episcopal Church,
Yardville, NJ.



Soles

for
the

Harvest

5K and Fun Run



DATE: OCTOBER 24, 2015

TIMES: 7:30 AM RACE REGISTRATION/CHECK-IN
8:45 AM 1 MILE FUN RUN/WALK
9:30 AM 5K RACE/WALK

CHECK-IN LOCATION: CREAM RIDGE WINERY
145 ROUTE 539, ALLENTOWN, NJ 08501

TIMING: BEST RACING SYSTEMS

AWARDS FOR 5K: TOP MALE AND FEMALE FINISHER OVERALL
TOP THREE MALE AND FEMALE IN
UNDER 15, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

MILE SPLITS, WATER STATION, AND POST-RACE REFRESHMENTS

REGISTRATION: 5K: \$20 ON OR BEFORE OCTOBER 15
\$25 ON DAY OF RUN

1 MILE FUN RUN/WALK: \$10 or \$15 WITH T-SHIRT

T-SHIRT FREE TO PRE-REGISTERED 5K ENTRANTS
AND WHILE SUPPLIES LAST ON DAY OF EVENT TO RACE DAY ENTRANTS

Complete form below to register by mail, or register online at active.com or bestrace.com.
Questions? Contact us at solesfortheharvest5k@gmail.com

Return with checks payable to: Holy Apostles Episcopal Church, 1040 Yardville-Allentown Rd, Yardville, NJ 08620

NAME: _____ M F AGE (DAY OF RACE): _____ T-SHIRT: YL S M L XL

ADDRESS: _____ PHONE: (____) _____ - _____

CITY: _____ STATE: _____ ZIP _____ EMAIL: _____

WAIVER: In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors and administrators waive any and all rights and claims for damages I may have against Holy Apostles Church, its representatives and successors, and all sponsors, and will hold them harmless from injury suffered in this event. Also, none of the foregoing are responsible for the loss of personal items or any other form of aggravation in connection with this event. I understand that I must be in good health to participate in this event.

5K: 1 MILE: SIGNATURE: _____ DATE: ____/____/____

SIGNATURE OF PARENT OR GUARDIAN (if under 18): _____