

5K Challenge for **ch**hange



Sunday - August 26, 2012
First Annual 5K Run/Walk
 Brookdale Community College
 Lincroft Campus

SCHEDULE

7:00 - 8:15 am

Registration/Packet Pickup

8:30 am

5K Run/Walk START

9:45 am

New Center for **ch**hange
 Inaugural Ceremony & Awards

REGISTRATION

Online at www.JSRC.org,
www.chhange.org or
www.bestrace.com

Registration & checks
 can be mailed to:

Chhange/BCC
 765 Newman Springs Road
 Lincroft, NJ 07738

COURSE

- Accurate course measurement by Dave Hoch
- Timing by Best Racing
- Picturesque Brookdale Campus, Collins Arena, Lincroft, NJ (Parking Lot 1)

ENTRY FEES

Preregistered/postmarked by 8/11

\$20

or after 8/11, including Race day

\$25

BENEFITS



AWARDS

Trophies Awarded to
 Overall Top 3 Male & Female
 Runners + Medals Awarded to
 Top 3 Male & Female
 in each group:

14 & Under	40- 49
15- 18	50- 59
19- 29	60- 69
30- 39	70 & Over

AMENITIES

- T-shirts to all Pre-registrants, & All Others, while supplies last
- Music & Refreshments
- Random Drawings

OFFICIAL ENTRY FORM — 5K Challenge for Chhange — August 26, 2012

Age on Race Day _____ Birth Date _____ Male ___ Female ___ Shirt Size (circle one): S M L XL
 (Please print)

Last Name _____ First Name _____

Street _____ City _____ State _____ Zip _____

Phone _____ email _____

WAIVER AND RELEASE

I, _____, acknowledge and agree to assume the risks associated with any and all activities in the **5K Challenge for Chhange** (Center for Holocaust, Human Rights & Genocide Education) at Brookdale Community College. 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, and hold harmless, the presenting organization (Chhange/BCC) and any sponsoring organizations, and/or any co-sponsors, their representatives, successors, agents, servants or employees, and assignees for any and all injuries suffered by me in said run/walk. I recognize that I must be in good health and of sufficient training and experience in order to successfully compete in this event, and I certify that I am in good physical condition for this event. I assume all risks associated with running/walking, including, but not limited to, falls, contact with other participants, the effects of weather, the conditions of the course surface, all such risks being known and appreciated by me. I hereby grant permission to Chhange/BCC to use photos that may include me for promotion/publicity. With my signature, I acknowledge that I have read and accept these terms under which my entry is made. All fees are non-refundable.

Signature (Parent or Guardian Signature if under 18)

X _____ Date: _____

(Name MUST ALSO be printed above)

Please make checks payable to: Chhange/BCC
Total Amount Enclosed \$ _____