## Dumont Run for Fun

Saturday, September 13, 2008 Honiss School, Dumont, NJ

5K Run and  $1^{1}/2$  Mile Walk  $\frac{1}{2}$  Mile Kids' Sprint to the Finish (ages 5-10)

Proceeds to benefit:
The Ryan Caspare Fund to fight childhood cancer

Ribbons to 1st 100 walkers • Medals to 1st 100 5K finishers

Medals to 1st 75 Kids Sprinters • Random giveaways • T-Shirts • Age group trophies

## **Entry Fees:**

- 5K \$15.00 / \$13.00 for USATF members
- 11/2 mile walk \$10.00
- Kids' Sprint to the Finish \$5.00

### Course:

- Flat, 2 slight inclines, running through middle of Dumont Day site at Memorial Park
- Strollers and baby joggers welcome in 1<sup>1</sup>/2 mile walk race
- No skates, bikes, roller blades or pets
- Course is certified by USA Track and Field

### Awards:

- Ist, 2nd, and 3rd place trophies and watches for top runners in each age group
- Plaques awarded to top 3 Dumont runners

### **Amenities:**

- T-shirts and gift bags to pre-registrants and on race day while supplies last
- Athletic trainer and ambulance on site

### For more information contact:

- Harry Styliano: (Home) 201-439-1106 (Cell) 201-916-2323
- Allen Dickon: (Home) 201-384-0508 (Cell) 201-276-3187

# Check-in on date of run at Honiss School 7:00-8:40 a.m. I 1/2 Mile Walk 8:10 a.m. I/2 Mile Kids' Sprint (ages 5-10) 8:40 a.m. SK Run 9:10 a.m. Make checks payable to: The Ryan Caspare Fund. Mail to: James R. Gash, 140 Fern Street, Washington Township, NJ 07676 Postmark by 8/15/2008 Official Entry Form for the Dumont Run for Fun

	Offi	cial Entry Fo	orm for	the Dum	ont R	un for l	Fun			
5K Run	I 1/2 Mile Walk			Kids' Sprint to the Finish						
Last Name:		First Na	First Name:		Phone			e: ()		
Street Address:										
City:		State:	Zip:		_ Emai	il:				
Date of Birth:/_	/_	_ Age on Race [	Day:	Sex: M _	F	_ T-Shirt:	S	M	_ L	_ XL
2008 USATF #										
Please read carefully and sign and run unless I am medically risks associated with running conditions of the course, all suaccepting my entry, I, myself Dumont Bd. Of Ed., The Ryar	able and pro this event in uch risks be and anyone	perly trained. I agree a cluding but not limite ing known and apprec entitled to act on my	e to abide by are ed to falls, con ciated by me. behalf, waive	ny race official tact with othe Having read thi and release the	relative t r particip is waiver e Borough	o my ability to ants, the effer and knowing of Dumont,	to safely co ct of weat these fact Dumont \	omplet ther, tr s and in Vol. An	te the ru raffic and n conside	in. I assume all I the eration of your
Signature (if over 18)							Date _		<i>I</i>	
Parent or Guardian Sign	ature (if u	ınder 18)								