Jason's 5K Memorial Run
Sunday, August 5th 9:00AM
Hillsborough High School
Hillsborough, NJ
Register Online @

https://runsignup.com/Race/NJ/Hillsborough/Jasons5KMemorialRun

USA TRACK & FIELD NEW JERSEY

North Jersey

New Jersey Grand Prix Event 500 Points

Entry Fees - Non-Refundable:
5K Pre-Registration until July 25th - $25
After 7/25 &Race Day Registration - $30
$2 Discount for USATF-NJ Members until 7/25

Schedule:
Packet Pick-Up August 5th – 7:30am
Race Start – 9:00am

Computer Timing: Best Racing Systems
Results Posted at: www.bestrace.com

Course
USATF certified/sanctioned event
NJ Grand Prix 500 Points
Flat & fast, water stops on course & finish

Awards
1st, 2nd & 3rd Overall Male/Female
1st, 2nd & 3rd in 5 year age groups 10 & under, 11-84

T-Shirts to all pre-registered 5K runners, others while supplies last.

Official Entry Form – Pre-registration ends July 31, 2011
Mail check & entry form to: Jason's Memorial 5K
1 Peterson Rd. Hillsborough, NJ 08844
Make checks payable to: Jason's Memorial 5K

Last Name _____ First Name _____

Email _____

Street Address _____ City _____ State _____ Zip _____

DOB _____ Age on Race Day _____ Sex M F USATF #_____

Please read carefully and sign Release and Waiver of Liability: I know that running a road race is a potentially hazardous activity and that I should not enter and run unless I am medically able and properly trained. I agree to abide by any race official relative to my ability to safely complete the run. I assume all risks associated with running this event including but not limited to falls, contact with other participants, the effect of the weather, traffic and the conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, myself and anyone entitled to act on my behalf, waive and release, all race volunteers and all sponsors, their representatives, employees and successors from any and all claims and liabilities of any kind arising out of my participation in this event or carelessness of the person named in this waiver. Furthermore, I grant to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes.

Signature (if over 18) _____ Date_____

Parent or Guardian Signature (if under 18) _____

For more information contact Donna Dourney at racedirector@therunningcompany.net

Shirt size Small_____   Med_____   Large_____   XLarge_____   XXLarge_____