

NEPTUNE CITY DAY

“17th Annual”



RUN **5K** WALK

August 1st, 2009

RACE TIME 8:00 AM

LOCATION: W.SYLVANIA AVE & HWY # 35 NEPTUNE CITY, NJ

REGISTRATION BOOTHS OPEN at 6:30AM

A VERY PLEASANT & NEARLY FLAT COURSE FINISHING AT MUNICIPAL BEACH/PARK

TIMING BY: *BEST RACING SYSTEMS*

Sponsored By: Retro Fitness

In Cooperation with the Jersey Shore Running Club WWW.JSRC.ORG

Prizes To Top 3 Overall M & F Finishers

TROPHIES TO 1ST, 2ND, & 3RD PLACE AGE GROUP WINNERS, M & F

AGE GROUPS: 12 & under, 13-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

TROPHIES FOR NEPTUNE CITY RESIDENTS TOP 3 M & F

NO DUPLICATE PRIZES

*A FULL DAY OF ACTIVITIES IS PLANNED BEGINNING IMMEDIATELY
AFTER THE 5K RUN/WALK AND WILL CONCLUDE WITH A
SPECTACULAR FIRE WORKS DISPLAY AT 9:00 PM*

REGISTRATION \$ 20.00

REGISTRATION WITH PROOF OF RETRO MEMBERSHIP \$ 15.00

***TOP QUALITY T-SHIRTS TO ALL PRE REGISTRANTS
WHILE THEY LAST FOR POST REGISTRANTS**

Shirt pick up & late registration 5- 8 PM., July 29th, at The Neptune City Community Center
116 Third Avenue, Neptune City

Make checks payable to: Neptune City Day 5K

Mail all entries to:

Neptune City Day, 5K RUN / WALK, 106 W. SYLVANIA AVE, NEPTUNE CITY, N. J. 07753

Register on line at jersey runner.com or www.raceforum.com/neptunecityday

Name _____ Age ___ Male ___ Female ___

Address _____ City _____ State _____ Zip _____

Phone(____) _____

Neptune City Resident-yes _____ no _____ E Mail Address _____

I hereby for myself, my heirs, executors, administrators, do waive and release any and all rights and claims for damages of any nature which I might have against any organization, municipality, or any individual associated with this event and agree to hold harmless from any claim such parties. I have been advised that I must be in good health to participate in this event. I also give my permission without fee, for use of my name and or picture in any broadcast, telecast or print media account of this event. Further I acknowledge that I have read and fully understand the conditions under which this entry is made and accept them.

SIGNATURE _____ DATE _____

(if you are under 18 years of age this form must be signed by a parent or guardian)

** THESE FORMS MAY BE REPRODUCED**FOR MORE INFO CALL (732) 774-0089 **