

 Community
Options, Inc.



CUPID'S CHASE

LIVE. LOVE. RUN.

5K IN SUPPORT OF PEOPLE WITH DISABILITIES

February 13, 2016

Community Options, Inc. invites runners, walkers, and rollers (baby strollers and wheelchairs) to help make a difference in the lives of people with disabilities by participating in our annual Cupid's Chase 5K. Because of you... we can make a difference!

Race Location

Buccleuch Park
321 Easton Avenue
New Brunswick, New Jersey 08901

Registration: 8AM

Race Begins: 10AM

5K Early Registration Fees

\$20 on or before September 30, 2015

\$25 on or before December 31, 2015

\$30 on or before February 12, 2016

5K Registration Fees

\$40 February 13, 2016 - **Event Day**

Contact Information

Cupid's Chase Race Director
256 Route One North
Edison, NJ 08817
Ph: 609.858.6137

Register Today CupidsChase.org

Community Options, Inc. is a national non-profit organization. Our mission is to provide housing, support services and advocacy assistance to help empower people with disabilities. For More Information: www.comop.org

Make Checks Payable to: Community Options, Inc. Mail checks to: Cupid's Chase Race Director | 256 Route One North, Edison, NJ 08817

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

Gender: Male Female Birth Date: ____ - ____ - ____ Age on Day of Race _____

Preferred Shirt Size: S M L XL XXL

Single - Looking for love, choose _____ Available/White. In a relationship - choose _____ Unavailable/ Red

WAIVER/RELEASE: In consideration of this entry and being allowed to participate in this event, I hereby assume all risks and for myself, heirs, executors and administrators, I further waive and release all claims and causes of action that I may have against Community Options, Inc., Community Options Enterprises, Inc., The Race Timing/Management Company and their respective officers, directors, volunteers, employees, sponsors, agents and any other party involved in Cupid's Chase 5K & 10K Run/Walk for any personal injuries, death and/or property loss I may suffer or in any way arising out of my participation in this event. I hereby certify that I am physically able to safely participate in the event and grant full permission to Community Options, Inc. to use and publish my name and image as a participant in photographs, video or other recordings connected with this event. All registration fees are non-refundable.

Signature _____ Date _____ Race Location _____

IMPORTANT! If the participant is under 18 years of age, the parent or guardian must sign here on behalf of the minor participant agreeing to the WAIVER/RELEASE language above and all the terms and conditions of the minor's participation in the event.

Signature (Parent/guardian if participant is under 18 years of age) _____ Date _____



Follow Us & Like Us:

[www.Twitter.com/
CupidsChase5K](http://www.Twitter.com/CupidsChase5K)

[www.Facebook.com/
CupidsChase](http://www.Facebook.com/CupidsChase)

