



THE OCTOBERWOMAN FOUNDATION  
FOR BREAST CANCER RESEARCH  
P.O. Box 546 • Park Ridge, NJ 07656

4TH ANNUAL **pinkribbon walk, run & fun day!** Sunday, May 17th, 2009



PROCEEDS TO BENEFIT THE MASK FOUNDATION AND  
HACKENSACK UNIVERSITY MEDICAL CENTER  
501 (C)(3) NON-PROFIT ORGANIZATION

## Registration

Please complete & return this form & pledge sheet to:  
The Octoberwoman Foundation, PO Box 546,  
Park Ridge, NJ 07656 by **May 8, 2009.**

Minimum pledge total of \$25 is required to participate and receive a free "Pink Ribbon T-shirt." Children under 10 are free (T-shirt not included.)

### Runner Registration:

Register Online at:  
<http://raceforum.com/registration/EventDetail.aspx?e=408>

I am participating in the 5K run.

**Awards:** Trophies will be given to the top male & female runners. Medals awarded to top finishers in each age category.

### Age Group: (please circle one)

- 14 and under      40 - 49
- 15 - 18            50 - 59
- 19 - 29            60 - 69
- 30 - 39            70 and over



### Walker Registration:

I am participating as a walker.

I am participating in the Dog Walk.

Name \_\_\_\_\_  
 Age \_\_\_\_\_ Sex \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail address \_\_\_\_\_  
 Check here if you are under 18 (parent/guardian signature required)  
 X \_\_\_\_\_

In consideration of the acceptance of my entry, I myself, my representative and assigns do hereby release and discharge The Octoberwoman Foundation, the town of Park Ridge, the race officials, volunteers, sponsors (hereinafter releases) for any claim arising out of my participation in this athletic event. I verify that I have full knowledge of the risks involved, and I am physically fit and sufficiently trained to participate in this event. I am at least 18 years of age or have had this release signed by my parent/guardian if I have not yet reached the age of 18. Participants also agree to allow The Octoberwoman Foundation to use its name and photo in any public relations material for this or future events. ALL dogs must be vaccinated, licensed, and social with other dogs and people.

**Total Pledges Collected: \$** \_\_\_\_\_

Youth L      Youth XL  
 Adult S      Adult M      Adult L      Adult XL

Additional T-shirts will be available for a \$20 donation while supplies last.

### Optional:

I am walking/donating in honor or memory of \_\_\_\_\_

## Payment & Sponsor Information

### Payment options:

**Total Amount Included: \$** \_\_\_\_\_

I am unable to attend but will support the cause with a donation.

Check(s) enclosed (made payable to The Octoberwoman Foundation)

Charge to my credit card  
 Visa     Mastercard     Amex

Card # \_\_\_\_\_

Exp Date \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_

Sponsor Pledge Sheets and registration forms available at [www.octoberwoman.org](http://www.octoberwoman.org)

### Become a Sponsor!

All sponsors will be listed in our program. Limited space available on printed materials.

**Sponsorships are due April 17, 2009.**

\$1000 T-Shirt Sponsor. Your company's logo will be placed on the sleeve of our custom designed Pink Ribbon T-shirt. Limited to two.

\$250 T-Shirt Sponsor. Your company's logo will be placed on the back of our Pink Ribbon T-shirt. Limited space available.

\$150 Vendor Table. Your company will be given the opportunity to have an informational table at the event to promote your corporation. Certain restrictions may apply.

\$100 Mile Marker Sponsor. Your company's logo will be placed at mile markers/water stations along the route.

\$75 T-Shirt Listing. Your name will be listed on the back of our Pink Ribbon T-shirt. Limited space available.

I am unable to sponsor this year's event, enclosed please find a donation in the amount of \$ \_\_\_\_\_.

**Logo graphics must be submitted in high resolution pdf format.**

Name \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail address \_\_\_\_\_