



2nd Annual Take the Lead 5K Run & 1 Mile Walk Registration Form

Pre-registration due June 1, 2012

Team registration: Please see reverse side.
Individual registrants: Please complete the front of this form.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____ Date of Birth: ___/___/___

Sex: Male/Female

I will participate in the:

5K Run
1 Mile Walk

T-Shirt Size:

Child: S M L
Adult: S M L XL

5K Run

1 Mile Walk

Adults & children 13 & up: \$25
 Child ages 5-12: \$15

Adults & children 13 & up: \$10
 Child ages 5-12: \$5

*All prices for race day registration will be \$5 more. USATF members receive \$2 off.
All underage participants MUST be accompanied by a parent or guardian.
For team registration please complete both sides of this form.
Children 5 and under are free!*

Check enclosed for \$ _____ (please make payable to GSHNJ)

Cash enclosed \$ _____

Credit Card \$ _____

Type of card: MC / Visa / AMEX / Discover

Card Number: _____

Expiration: ___/___ Security Code: _____

Authorized Signature: _____

Please remit completed form & payment to:

Attn: Take the Lead 5K
Girl Scouts Heart of NJ
201 Grove St. East
Westfield, NJ 07090

USATF members receive
\$2 off registration!
USATF-NJ #:

ALL PARTICIPANTS IN THE GIRL SCOUT HEART OF NEW JERSEYS TAKE THE LEAD 5K RUN/1 MILE FAMILY FUN WALK (COLLECTIVELY THE EVENTS) AND RELATED EVENTS ARE REQUIRED TO ASSUME ALL RISK OF PARTICIPATION IN THE EVENTS BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT: The undersigned athlete (Athlete) and on behalf of Athlete's personal representatives, assigns, heirs, and executors, fully and forever releases from all liability, including negligence, the Girl Scouts Heart of New Jersey, and their respective employees, agents, volunteers, representatives and affiliates (collectively the Releasees). Athlete and on behalf of Athlete's personal representatives, assigns, heirs and executors waives the right to sue Releasees for all losses and damages that arise from any injury to Athlete or Athlete's property or resulting in Athlete's death in connection with the Athlete's participation in the Events including but not limited to losses or damage caused by the negligence of all or any of the Releasees, the negligence of others, weather conditions or otherwise, and also including any pre or post-race activities and any programs and/or giveaways conducted at the events and/or activities by a sponsor or other third party. The Athlete warrants that Athlete is in good physical condition and is able to safely participate in the Events. The Athlete is fully aware of the risks and hazards inherent in participating in the Events, including the possibility of serious physical trauma, injury or death, and elects to voluntarily compete in the Events knowing such risks. The Athlete agrees to the use of Athlete's name and photographs in broadcasts, newspapers, magazines, brochures, and other media without compensation. The Athlete acknowledges that the entry fee is non-refundable and non-transferable. The Athlete grants to the Somerset County Parks Commission and its agents, affiliates, and designees access to all medical records (and physicians) in order to authorize medical treatment as needed. The Athlete acknowledges that the Girl Scouts Heart of New Jersey has the right to alter, change, cancel and/or postpone any of these events as a result of circumstances that would affect or impact the event which are beyond their control. The Athlete warrants that all statements made in this release agreement are true and correct and understands that Releasees have relied on them in allowing Athlete to participate in the Events. ATHLETE HAS READ THE FOREGOING, UNDERSTANDS ITS CONTENTS AND INTENTIONALLY AND VOLUNTARILY CERTIFIES COMPLIANCE BY ACCEPTING THIS WAIVER.

Signature: _____

(or signature of Parent or Guardian if entrant is age 17 or under)

Date: ___/___/___



Team Registration

Online team registration is also available! Go to: <http://tinyurl.com/GSHNJ-TTL100>

Instructions: Please complete the following form to register your team. Each team member (or parent or guardian if participant is 17 or under) must sign the liability waiver. This can be obtained by emailing takethelead@gshnj.org and must be completed and returned before the start of the race. Please also complete the front of this registration form with payment information.

Team Name: _____

Troop/Service Unit (if applicable): _____

Team Captain Name: _____

Team Captain Email: _____

Team is Participating in the (circle one): 5K Run OR 1 Mile Fun Walk

Team Members:

Name:	Sex:	DOB:	Tshirt Size:
1. _____	M/F	___/___/___	Adult/Child S/M/L/XL
2. _____	M/F	___/___/___	Adult/Child S/M/L/XL
3. _____	M/F	___/___/___	Adult/Child S/M/L/XL
4. _____	M/F	___/___/___	Adult/Child S/M/L/XL
5. _____	M/F	___/___/___	Adult/Child S/M/L/XL
6. _____	M/F	___/___/___	Adult/Child S/M/L/XL
7. _____	M/F	___/___/___	Adult/Child S/M/L/XL
8. _____	M/F	___/___/___	Adult/Child S/M/L/XL
9. _____	M/F	___/___/___	Adult/Child S/M/L/XL
10. _____	M/F	___/___/___	Adult/Child S/M/L/XL

If you have more than 10 team members, please include a full list on a separate sheet with this form. More team members can be added until the pre-registration deadline, Friday, June 1 by emailing takethelead@gshnj.org.

For Troop Leaders/Service Unit Managers: If you choose to chaperone your Troop or Service Unit, it is your responsibility to collect and bring with you permission slips from each girl.

All teams will receive a Team Fundraising page! After you register, you will be contacted with details on how to set up your page. For more information, please email takethelead@gshnj.org.