



Jason's 5K Memorial Run Sunday, August 7th 9:00AM

Hillsborough High School

Hillsborough, NJ

Register Online @
www.bestrace.com
www.active.com



Entry Fees - Non-Refundable:

5K Pre-Registration until July 31st - \$20

Race Day Registration - \$25

\$2 Discount for USATF-NJ Members until 7/31

1 Mile Walk - \$10 Donation

Schedule:

Packet Pick-Up Aug. 7th - 7:30 am

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 ddracedirector@gmail.com