Watchung Hills Regional Municipal Alliance



2012 Certified 5K Run and 1 Mile Fitness Walk



WHMA is a volunteer organization concerned about the consequences of DRUG and ALCOHOL ABUSE in our communities of: Warren Township, Watchung Borough, Long Hill Township, & Green Brook Township.





DATE:SUNDAY, OCTOBER 14 9:00 a.m.

On-site registration 8:00 a.m.

LOCATION: WATCHUNG LAKE

Brookdale Road, Watchung, NJ Mobus Field

ENTRY FEE:

Received Before Oct.7

- \$20.00 run with T-shirt
- \$13.00 walk with T-shirt

Received After Oct. 7

- \$25.00 run
- \$16.00 walk

MAKE CHECKS PAYABLE TO: WHRMA - Watchung Hills Regional Municipal Alliance
MAIL CHECKS AND APPLICATION TO: WHRMA 108 STIRLING RD., WARREN, NJ 07059

Questions call: Carolyn Seracka 732-968-1051 ext. 3 or Jack Walsh 908-561-8883

Online registration at: https://register.bestrace.com/register/?event=10980

5K Prize Categories										
	Medal	S First, Sec	Prizes							
٧	Vomen		Men	Children	7					
15-19	40-49	15-19	40-49	14 & Under	Overall Male and Female					
20-29	50-59	20-29	50-59		Adult Winners					
30-39	60 & Over	30-39	60 & Over		\$50.00 gift certificate & medal					
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THE 2012 WATCHUNG HILL REGIONAL MUNCIPAL ALLIANCE 5K RUN OR 1 MILE WALK REGISTRATION APPLICATION

Last Name	First Name	
E-MAIL Address		Gender □ Male □ Female
Home Address		Age on Oct.14th
City/Town	State	Zip Code
Home #	Cell #	Birthdate
Activity: 🗆 Runner	□ Walker	■ Wheelchair

Acceptance declaration:

- I hereby acknowledge for myself and/or my participating child, that I, my child's or mine/their heirs, executors and administrators waive and release any claims that may arise against <u>The Watchung Hills Municipal Alliance and Watchung Hills Regional High School</u> or their representatives or volunteers, successors or assignees for any injuries that may be suffered by me or by my child during this event.
- I further certify that I and/or my child are physically able to participate in this event.
- I further authorize the use of my name/photo or my child's name/photo for event publicity.

Signature:	 	 	 	 	 		Date:	 _
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