Walk the Shore for A Cure - September 6, 2008

Registration Form

Please fill out form completely:

Team Name _____
Last Name _____ **First Name** _____
Address _____
City_____**State**_____ **Zip** _____
Phone Number_____
Email: _____
Sex M _____ **F** _____
Shirt size: S _____ **M** _____ **L** _____ **XL** _____ **XXL** _____
Age on day of race _____

Check one: **5K Run** _____ **5K Walk** _____

Pre-Registration - 5K – $25
Race Day Registration - 5K – $30
Race Day Kids Fun Run Registration – $15

Make checks payable to: Walk the Shore for a Cure
Send entry forms to:
111 12th Avenue
Seaside Park, NJ 08752

Release

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 or weather, including low or high temperatures and/or humidity, 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 the Walk the Shore for a Cure race, it's officers, coordinators and race volunteers, the Borough of Seaside Park and employees, 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 persons named in this waiver. Further, I grant to all of the forgoing to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes.

Signature _____
Parent or guardian (if under 18Yrs old) _____

Date _____