

HOT PURSUIT 5K FUN RUN/WALK MAY 3, 2009



REGISTRATION INFORMATION

Please print, complete all sections and mail.

Register Online at www.RaceForum.com/HotPursuit

SONJ Athletes Check Here

Last Name _____ First Name _____ Middle _____

Address _____ Apt. # _____

City _____ State _____ Zip code + 4 _____

Gender: M / F Birth Date: _____ / _____ / _____ Age (day of race) _____
MONTH DAY YEAR

Day Phone _____ Mobile Phone _____

E-mail address (please complete only if used on a weekly or more frequent basis) _____

PAYMENT INFORMATION

**Yes, I would like to participate in the
Bergen County Police
Hot Pursuit 5K / Fun Run / Walk**

(USATF-NJ Member \$18 / USATF-NJ Member after 4/25/09 \$22)

- 2009 USATF #: _____
- Enclosed is my **\$20.00** early-entry fee
(if registered by 4/25/09)
- Enclosed is my **\$25.00** entry fee
(registered after 4/25/09) and on race day)
- I am enclosing additional donations of:
\$25 \$50\$ 100* \$250* \$500* +\$500*
other \$ _____

TOTAL AMOUNT ENCLOSED IS:

**Incentives available for additional dollars raised of \$100 or more.*

Please send completed entry form and check or money order payable to:

**Bergen County PBA Local 49 Civic Association
ATTN: HOT PURSUIT 5K FUN RUN / WALK
PO Box 4333, River Edge, NJ 07661**

T-SHIRT SIZE
Circle one (Adult sizes only)
S M L XL XXL



WAIVER

In consideration of my entry into the Hot Pursuit 5K Run / Walk being accepted, I, intending to be legally bound hereby for myself, my heirs, executors and administrators, waive and release Special Olympics New Jersey and the Bergen County PBA, heirs and assigns, as well as all Hot Pursuit 5K Run / Walk Special Olympics volunteers, participants, and sponsors from all liability claims, demands, losses or damages suffered by me in said event. I represent that I understand the nature of the event and that I am qualified, in good health and in proper physical condition to participate in such event. I hereby grant my full permission to any and all of the foregoing to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature (Parent or Guardian if under 18) _____ Date _____

THIS FORM MUST BE SIGNED AND COMPLETED TO PARTICIPATE