



Save the date

Saturday,  
September 19<sup>th</sup>



# FRIENDS OF THE POOR 5K RUN/WALK

**Saturday, September 19<sup>th</sup> - Downtown at the Gardens**

Race starts at 7:30AM, walk at 8:15AM. Optional 1 mile walk.  
Certified Course/Chip Timing/Food/Music/Age Group Awards/Shirts guaranteed to the first 300.

Our mission is to raise funds to help make a difference for those living in poverty.

For more information contact Chuck Neeld 561-841-6601 or [chuckn@neeldpaper.com](mailto:chuckn@neeldpaper.com)  
To register: [www.raceroster.com/5851](http://www.raceroster.com/5851)

*The Friends of the Poor® Walk/Run is a national event coordinated by the Development Team of the National Council of the United States of St. Vincent de Paul.*

It began as a national program with the purpose of providing the local Society of St. Vincent de Paul (SVdP) Conferences and Councils the additional funds to help support their special works projects.

Growing every year, the Friends of the Poor® Walk/Run had another great year in 2014! Attracting over 25,000 walkers, raising over \$2.8 million, and having events at 247 different locations across the United States were all measures of success.

**Register online at [www.raceroster.com/5851](http://www.raceroster.com/5851)**



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RACE ENTRY FEES

Team name (if applicable) _____		Race Day
___ Adult 5K Race	\$30	\$35
___ Adult Walk	\$30	\$35
___ Student (18 & younger) 5K Race	\$25	\$35
___ Student (18 & younger) Walk	\$25	\$35
___ Senior Citizen (65 & older) 5K Race	\$25	\$35
___ Senior Citizen (65 & older) Walk	\$25	\$35
___ 1 Mile Walk Adult	\$30	\$35

For your convenience, there will be a packet pick up (chip, bib number & shirts) on THURSDAY, SEPTEMBER 17<sup>th</sup> at Downtown at the Gardens (address to be announced) from 4:00 to 7:30PM and at the race site on race day starting at 6AM.

Please allow yourself plenty of time to pick up your packet.

Name: \_\_\_\_\_ Sex: Male \_\_\_ Female \_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age on Race Day: \_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Phone: \_\_\_\_\_

**Make checks payable to: Friends of the Poor / St. Vincent de Paul Mail to: PBMT, PO Box 1073, West Palm Beach, FL 33402 -1073**

Email: \_\_\_\_\_ Shirt size: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ XXL \_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

Waiver: In consideration of my participation in the Friends of the Poor 5K Run/Walk, I hereby for myself, my heirs, and my personal representatives assume any and all risks which might be associated with the event, and I further waive, release, discharge and covenant not to sue Palm Beach Gardens, Downtown at the Gardens, AccuchipUSA, Inc., Palm Beach Marathon Training, organizers or other representatives, or successors and assigns, for any injuries or damages of any kind whatsoever as a result in taking part in the events and related activities. I hereby grant full permission to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose, including commercial advertising without monetary payment to me.

I acknowledge that my entry fee is non-refundable, including if the race is cancelled, and my entry is non-transferrable.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(or parent if under 18)

OFFICE USE ONLY: Chip # \_\_\_\_\_ circle one CASH CHECK