Sunday June 9, 2013

Rain or Shine 8am Start

Race Start 1701 Walnut Avenue, Adjacent to the Devon Avenue Athletic Fields

Sign up by April 1, 2013 to guarantee a Tech Running Shirt.





To Benefit the Haddon Glen Swim Club

Register Online

www.LMSPORTS.com

CASH PRIZES

- * USATF Certified Course #NJ12003WB
- * Start and End at Same Location
- Mostly Flat and Fast
- * One Challenging Hill
- ★ Two Water Stations
- * Shaded Neighborhood Run
- * Ample Parking

AWARDS

\$ 100 Cash Prize each 1st Overall Male and Female

Top Male and Female in each age receive medals

14 and under 15-19 20-29 30-34 35-39 40-44 45-49 50-54 55-59 60+

- Runners finishing under 45 minutes will receive an official time.
- Tech Running Shirts while supplies last.
- Finish Line, Timing and Results by L&M Sports and Event Productions Inc.

START 8AM RAIN OR SHINE

Sponsorship Available Contact Elizabeth Grove 856-546-4884

| PARTICI | IPAN' | r Regis | TRATI | ON /RELEASE |
|------------------------------------|-------|---------|-------------|--------------|
| FULL NAME: Please Print Clearly | | | | |
| Race Day Age: | | | Phone: | |
| Sex: | Male | Female | Shirt Size: | S M L XL XXL |
| Address: | | | | |
| City: | | | State: | |
| Zip Code: | | | Email: | |

RACE REGISTRATION \$20.00 Pre-Race \$25.00 Race Day Mail-in registration deadline: June 1, 2013

On-line registration (LMSPORTS.COM) deadline Midnight June 6, 2013

Check Payable to: Haddon Glen 5k

Mail to: Haddon Glen 5k, 110 7th Avenue Haddon Heights NJ 08035

<u>WAIVER</u>: IN CONSIDERATION FOR ACCEPTING THIS ENTRY AND GRANTING OF THE RIGHT TO PARTICIPATE IN THIS EVENT, I THE UNDERSIGNED, INTEND TO BE LEGALLY BOUND HEREBY, FOR MYSELF, MY HEIRS, PERSONAL REPRESENTATIVE, SUCCESSORS AND ASSIGNS WAIVE AND RELEASE ANY AND ALL CLAIMS FOR LOSSES AND DAMAGES I MAY HAVE AGAINST EVENT COMMITTEE, VOLUNTEERS EVENT SPONSORS, HADDON GLEN SWIM CLUB, HADDON HEIGHTS BORO, L&M SPORTS, THEIR REPRESENTATIVES SUCCESSORS AND ASSIGN AND/OR ANY OTHER PERSON WHOMSOEVER IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN THIS EVENT AND VERIFIED BY A LICENSED PHYSICIAN AND HAVE SUFFICIENTLY TRAINED FOR THE COMPLETION OF THIS EVENT.

I UNDERSTAND THAT IF MY TIME EXCEEDS 45 MINUTES I WILL NOT RECEIVE AN OFFICIAL TIME.

SIGNATURE _____ DATE____