

# JONATHAN SLUSHER MEMORIAL SCHOLARSHIP FOUNDATION

## 5K RUN/WALK AND KIDS' FUN RUN

River Road & Columbia Trail

Starts at Califon Bridge

SUNDAY, OCTOBER 4, 2015 @ 1PM



This race can be entered with a \$3 discount as a Grand Prix event if you are a USATF-NJ member.

### START TIMES (RAIN OR SHINE)

10AM—11:30 CALIFON ISLAND PARK—RACE PACKET PICK-UP FOR ALL PRE-REGISTERED RUNNERS

10:00—12:00 CALIFON ISLAND PARK—SAME DAY REGISTRATION MUST TAKE PLACE BY 12:00

12:20—12:40 CALIFON ISLAND PARK—GROUP WARM UP

12:40—1:00 RIVER ROAD @CALIFON BRIDGE RACE STARTS PROMPTLY @ 1:00PM

2:00 CALIFON ISLAND PARK—KIDS FUN RUN—100YD DASH

2:30 RAMBO'S STORE MAIN STREET CALIFON—AWARDS CEREMONY

### ENTRY FEE:

PRE-REGISTRATION BY OCT 1 -- \$25 AFTER OCT 1 -- \$30 KIDS (AGE 10 AND UNDER)--\$5

FAMILIES (4 PERSONS)--\$40

Awards: Trophies: First place overall for men, women and walker. First, second and third place medals for all age groups.

Online information and registration at [jonhslusher.org](http://jonhslusher.org); contact: Shirley Slusher, [slushersm@comcast.net](mailto:slushersm@comcast.net)

REGISTRATION FORM: Oct 4, 2015 1PM START

MAKE CHECKS PAYABLE TO: THE JONATHAN SLUSHER MEMORIAL SCHOLARSHIP FOUNDATION

MAIL TO: THE JONATHAN SLUSHER MEMORIAL SCHOLARSHIP FOUNDATION

79 GUINEA HOLLOW ROAD, LEBANON, NJ 08833

We are a 501-c-3 charitable foundation and all contributions are tax-exempt.

_____	_____	Male	Female	Run	Kid's Fun Run	Walk	USATF-NJ Grand Prix												
<b>Last Name</b>	<b>First Name</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 8&Under	<input type="checkbox"/>	<input type="checkbox"/>												
_____	_____	_____	_____	_____	_____	_____	_____												
<b>Mailing Address: Street</b>	<b>City/Town</b>	<b>State</b>	<b>Zip Code</b>	<b>USATF-NJ membership number</b>															
_____	_____	<table border="1"><tr><td colspan="3"><b>Age Category – check one</b></td></tr><tr><td>_____ 9-14</td><td>_____ 15-19</td><td>_____ 20-29</td></tr><tr><td>_____ 30-39</td><td>_____ 40-49</td><td>_____ 50-59</td></tr><tr><td>_____ 60-69</td><td>_____ 70-79</td><td>_____ 80+</td></tr></table>						<b>Age Category – check one</b>			_____ 9-14	_____ 15-19	_____ 20-29	_____ 30-39	_____ 40-49	_____ 50-59	_____ 60-69	_____ 70-79	_____ 80+
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<b>Contact Phone Number</b>	<b>Shirt Size</b>																		
_____	_____																		
<b>E-mail Address</b>	_____																		
_____																			
<b>Date of Birth</b>	<b>Age/Grade on Race Day</b>																		
_____	_____																		

### Waiver:

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, and the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road or any running surface, 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, for myself and anyone entitled to act on my behalf, waive and release the JONATHAN SLUSHER MEMORIAL SCHOLARSHIP FOUNDATION, the BOROUGH OF CALIFON, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature of Applicant

Date:

Guardian's Signature (if under 18)

Date: