

# 5K FOR Frankford Foundation

501(c)(3) PENDING

**SATURDAY, JULY 25, 2009**

**Run registration begins at 7 am; race begins at 8 am**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Birth Date \_\_ / \_\_ / \_\_\_\_ Gender  M  F T-Shirt size \_\_\_\_\_

Residence in  Branchville  Frankford  Other \_\_\_\_\_

Running Club  Yes  No Club Name \_\_\_\_\_

Parent/Guardian if under 18 \_\_\_\_\_ Phone \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

FEE: \$20 early registration by July 10<sup>th</sup> ; \$25 after July 10<sup>th</sup> \$ \_\_\_\_\_

Mail to: Frankford Foundation  
32 Mattison Avenue  
Branchville, NJ 07826

**Notice of Risk & Liability Release:** I hereby give permission for my child(ren)/self to participate in the 5K run. I recognize, understand and acknowledge that, as in all activities, there is always the inherent risk of injury up to and including death. I certify, to the best of my knowledge, that the current physical condition of my child(ren)/self is satisfactory for participation, that the above free of any health problems which would jeopardize participation, that I will notify the staff immediately should the above condition change at any time during participation in the race and that, upon request, I will furnish proof of current physical examination. The volunteers and sponsors have my permission to have a physician and /or emergency medical service treat and /or transport my child(ren)/self, if needed, at any time during the event. In consideration of participation by my child(ren)/self in the 5K run on the registration form, I, the under-signed, do hereby agree to hold harmless and indemnify the Frankford Foundation, it's volunteers against any claims for and on account of any and all injuries sustained by my child(ren)/self as a result of participation in the above –mentioned event. The volunteers and /or sponsors have my permission to photograph my child(ren)/self. I understand that these photographs may be used in the future promotional brochures, flyers or news releases.

**I have read and understand the Notice of Risk and Liability Release.**

Signature: \_\_\_\_\_

Date received \_\_\_\_\_ amount received \_\_\_\_\_ check no. \_\_\_\_\_ by \_\_\_\_\_