

2ND ANNUAL *Enriching Lives* 5K WALK/RUN



with Honorary Race Director Barbara Altman

Sunday, April 15, 2012 • Race starts at 9:00 AM!

• **PRE-REGISTER ONLINE AT SEASHOREGARDENS.ORG OR ACTIVE.COM. DAY OF REGISTRATION STARTS AT 7:15AM** •

Atlantic City Boardwalk at the Resorts Casino Hotel

REGISTRATION FORM

ONE FORM PER PERSON. PLEASE PRINT CLEARLY USING A BALL POINT PEN.

Name		Team Name if applicable - WALKERS ONLY	
Address			
City	State	Zip Code	
Phone	Email		
Birthdate (MM/DD/YY)	Age on Race Day	Gender	

Age and Gender information is **REQUIRED** for all runners.

I am entering: 5K Run 5K Walk TEAMS check here if you wish to be timed Wheelchair participant

Tee Shirt Size: S M L XL XXL

Note: All Pre-Registered Entrants will receive a T-shirt. Limited additional T-shirts will be available for sale online, at kick off event and on race day on a first-come first-served basis.

	COST	TOTAL
Early registration by 4/2/12 includes T-shirt	\$25	_____
All registration after 4/2/12 and before 4/13/2012 deadline	\$30	_____
Registration at the event	\$30	_____

I am unable to participate, but would like to donate _____

Mail completed registration form with check or money order to: Seashore Gardens Foundation, 22 West Jimmie Leeds Road, Galloway, NJ 08205 or register online by visiting www.seashoregardens.org and click on [read more](#) under the 5K Run/Walk information. On-line registration must be completed by 4/7/2012.

Signature _____

Parent's Signature (if under 18) _____

Please Note: This event will occur rain or shine. We reserve the right to cancel in extreme circumstances. In that event, there will be no refunds; rather your entry fee will be used as a donation to MAPS/SGLC.

WAIVER: In consideration of being permitted to participate in the MAPS/SGLC 5K Run/Walk, I hereby for myself, my heirs and personal representatives assume any and all risks which might be associated with this event. I further waive, release, discharge and covenant not to sue MAPS or Seashore Gardens Living Center, its offices, employees, sponsors, organizers, volunteers or other representative of their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities. I also agree to the use of any photo, film or videotape of the event for any purpose.

Race timing provided by AKSTS. Race results will be posted on-line the afternoon of the race.

AWARDS for 5K Run

Top 3 Overall, Male and Female:

1st Place
2nd Place
3rd Place

Awards will also be presented to the top male and female finishing in the following categories: Age Groups 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, 80+, Wheelchair Participants, Tortoise Award, Top Fundraising Team and Largest Team.

PLEDGE FORM

Donor's Name	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL DONATIONS \$ _____

All pledge forms, with money, may be turned in on event day at pledge table or send with checks or money orders payable to: Seashore Gardens Foundation, 22 W Jimmie Leeds Road, Galloway, NJ 08205. Mailed registrations must be postdated by 4/9/2012 in order to receive your event t-shirt.

For more information regarding the race or to find out about sponsorship opportunities, please contact Sharon D'Angio, Race Director, at dangios@seashoregardens.org or 609-748-4614.

• **Register online at www.seashoregardens.org or at active.com!** •