

# Survey Fives 5K RUN/WALK



• Pre-Register online at seashoregardens.org or active.com •

## SUNDAY, APRIL 14, 2013 . RACE STARTS AT 9:00 AM!

RACE BEGINS AT RESORTS CASINO HOTEL, NORTH CAROLINA AVE AND THE BOARDWALK

### **REGISTRATION FORM**

Name	Team Name if applicable	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.		
am entering: ☐ 5K Run ☐ 5K Walk ☐ TEAMS check here to be time	d 🗆 1.5 mi untimed Health Walk 🗀	Wheelchair racer	
Γ-Shirt Size: □ S □ M □ L □ XL □ X	XXL		
Note: All Pre-Registered Entrants will receive a T-sh	nirt.		
	COST	TOTAL	
Registration by 4/12/13 deadline Registration on race day	\$25 \$30		
am unable to participate, but would like to do	onate		
Mail completed registration form with check or money order to: Seashore Gar or register online by visiting www.seashoregardens.org and click on read mor ompleted by 4/7/2013			

Race timing provided by AKSTS. Race results will be posted online 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
	\$\$
11	\$\$
	\$\$
	\$\$
	\$\$
	\$\$
	\$\$
	\$\$
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 registration must be received by 4/7/2013 in order to receive your 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!

WAIVER: In consideration of being permitted to participate in the SGLC/MAPS 5K Run/Walk, I hereby for myself, my heirs and per-

sonal representatives assume any and all risks which might be associated with this event. I further waive, release, discharge and

covenant not to sue Seashore Gardens Living Center or MAPS, 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 tak-

ing 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.