



Proceeds Benefitting:
 Rutherford PBA #300,
 Rutherford Ambulance &
 Rutherford Fire Dept.

Memorial Park
Darwin Ave & Monona Ave
Rutherford, NJ

www.RutherfordPBA5k.com
www.facebook.com/RutherfordPBA5k

Sunday, October 23, 2016
 "5th Annual" 5k Run & 1 mile Walk

Costumes Welcomed!

START & FINISH

Monona Ave at Memorial Park

SCHEDULE OF EVENTS

- 7:45 AM – 9:45 AM - Check in & Registration
- 9:30 AM – Costume Contest Judging
- 9:45 AM – Zumba warmup with Dani!
- 10:00 AM – 5K Run begins
- 10:05 AM – 1 mile walk
- 11:00 AM – BBQ & Activities begin
- 11:30 AM – Awards Ceremony

AWARDS

- Monetary award for top 3 overall male & female
- Top 3 Male & Female per age group in 5 year Age Groups: *14 & under, *15 – 19, *20 – 24, *25 – 29, *30 – 34, *35 – 39, *40 – 44, *45 – 49, *50 – 54, *55 – 59, *60 – 64, *65 – 69, *70 – 74, *75 – 79, *80+
- Emergency Services Division
- Best Adult Costume & Best Children's Costume

COURSE

Sanctioned and certified by USATF-NJ



ENTRY FEES

- Pre-registration: \$25
- Day of race: \$35
- USATF-NJ Members: \$20 (Day of Race: \$30)
- Police, Fire, EMS: \$20 (Day of Race: \$30)
- Family of 4-8: \$5 off each member
- *Shirts and race packets while supplies last – Sign up early to make sure you get your desired size!**

REGISTRATION

***BY MAIL**

Tear off entry form at bottom, enclose check payable to "Rutherford PBA Local 300", and mail by October 15th, to:

RUTHERFORD PBA 300 5K
 PO BOX 182
 RUTHERFORD, NJ 07070

***ONLINE**

www.RutherfordPBA5k.com

PRE-REGISTERED PACKET PICKUP

Friday, October 21, 2016
 Mason's Cellar, 5pm – 8:30pm
 23 Park Avenue, Rutherford
 (Parking lot in rear)



Any questions? Email Craig & Scott at: RutherfordPBA5k@aol.com

Last Name: _____ **First Name:** _____ **Phone:** _____

Address: _____ **City:** _____ **St:** _____ **Zip:** _____ **DOB:** _____ **Age:** _____

Email: _____ **Sex (Circle):** M F **Shirt Size (Circle):** S M L XL XXL
 Youth Medium Youth Large

USATF-NJ # (if applicable): _____

Choose One: Walker Runner

Indicate if Police Officer, Firefighter, or EMT: _____

Waiver of Liability: In consideration for the acceptance of my entry, I, on behalf of myself, my heir, my executors, administrators, and assignees, hereby release myself and discharge the Borough of Rutherford, Rutherford First Aid Ambulance Corps, Rutherford Police Department, Rutherford PBA 300, associated sponsors, volunteers, USA Track and Field, and all other sponsors or beneficiaries and their representatives, successors and assignees for all claims for damages and causes of action arising from or out of my participation in the RUTHERFORD PBA 5K RUN/WALK HALLOWEEN FOOT PURSUIT. I attest that I am physically fit for this event. I hereby certify that I have read all the terms and conditions of this release and intend to be legally bound thereby. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature: _____

Date: _____

Parent Signature: (If under 18) _____