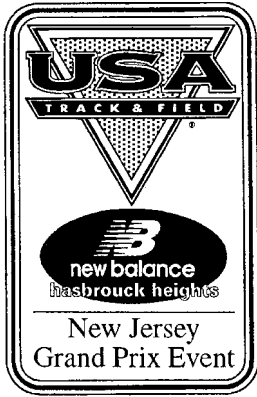


THE CENTER FOR EDUCATIONAL ADVANCEMENT & JOHANNA FOODS



11TH ANNUAL TURKEY TROT

**9:30AM THANKSGIVING DAY, NOVEMBER 27, 2003 FLEMINGTON, NJ
5K RUN & 2 MILE FITNESS WALK**

COURSE USATF-NJ certified, town roads, rolling hills, one water stop. Splits at 1 & 2 miles; post event refreshments. Our famous full color long sleeve T-shirts to all pre-registrants, and while supplies last on race day. Souvenir ribbons to all participants that finish.

REGISTRATION Pre-register by mail-postmarked prior to 11/20/03 or in person at CEA, 11 Minneakoning Road, Flemington, NJ 08822. Number, packet, shirt pick-up and late registration at CEA 11/22/03, 9:00am – 2:00pm, 11/24/03, 9:00am – 7:00pm and 11/25-26/03, 9:00am – 4:00pm. Thanksgiving Day, Flemington Womens' Club, 43 Park Ave., Flemington, NJ 08822, 7:30am – 9:00am.

Registration Fees	Pre-Registered	11/22/03 – 11/27/03
5K Run	\$17.00 (\$15.00 USATF Members)	\$22.00
2 Mile Walk	\$15.00	\$20.00

500 points

**THE 5K RUN WILL BE SCORED WITH THE CHAMPIONCHIP. CHIPS MUST BE RETURNED FOLLOWING THE EVENT
ALL RUNNERS MUST WEAR THEIR ASSIGNED CHIP, OR THEIR TIMES WILL NOT BE RECORDED.
ANY RUNNER NOT RETURNING THEIR ASSIGNED CHIP WILL BE CHARGED A \$35.00 REPLACEMENT FEE.**

AWARDS: Trophies to 1ST, 2ND & 3RD place overall M/F runners, 1ST, 2ND & 3RD place M/F Masters (40+) runners, 1ST, 2ND & 3RD place M/F runners in all (10-year) age groups and 1ST place teams-M/F/Co-ed.

CATEGORIES: M/F runners 14 and under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+. Also separate Masters (40+) category.

TEAMS: Teams to consist of 3-5 runners, fastest three score. Co-Ed teams must have a minimum of two female runners, one of whom will score. M/F/Co-ed teams may enter. **ALL TEAMS MUST BE PRE-REGISTERED**

LOCATION: Both events start & finish on Main Street (near the old courthouse) in Flemington, NJ.

**PARKING ON MAIN STREET IS PROHIBITED BEFORE & DURING THE EVENTS
FOR ADDITIONAL INFORMATION & DIRECTIONS, PLEASE CALL THE CENTER AT (908) 782-2911
E-MAIL: ttrot@ceaemployment.com**

**THIS APPLICATION MUST BE PRINTED, COMPLETE & SIGNED-ONE PERSON PER FORM, PLEASE COPY IF NEEDED
MAIL APPLICATION(S) AND ENTRY FEE(S) TO: CEA, 11 MINNEAKONING ROAD, FLEMINGTON, NJ 08822**

LAST NAME: _____ FIRST NAME: _____ MI: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

AGE (ON RACE DAY): _____ BIRTH DATE: ___ / ___ / ___ SEX(M/F): _____ EVENT (5K/2 Mi WALK): _____

2003 USATF NUMBER (IF APPLICABLE): _____ FASTEST 2003 5K: _____

TEAM NAME (IF APPLICABLE): _____

(Teams consist of 3- 5 runners. Co-ed teams to have a minimum of 2 female members, at least one of which will be scored).

HOW DID YOU LEARN ABOUT THE TURKEY TROT? _____

WOULD YOU LIKE TO RECEIVE: THE CEA NEWSLETTER? (Y / N) _____, E-MAIL EVENT UPDATES? (Y/N) _____

TOTAL DUE: 5K RUN \$ _____ /2 MILE WALK \$ _____ + TAX DEDUCTIBLE DONATION TO CEA:\$ _____ =TOTAL \$ _____

I know that participating in the Center for Educational Advancement/Johanna Foods Turkey Trot or Fitness Walk is a potentially dangerous activity. I understand that I should not enter and participate unless I am medically able and properly trained. For the safety of all participants, I understand that skates, baby strollers, baby joggers or animals are not permitted at this event. I agree to abide by the decision of any event official relative to my ability to safely complete the event. I assume all risks associated by my participation in the event for which I am registering, including, but not limited to falls, contact with other participants, the effects of weather, including heat, cold, ice and humidity, traffic and road-conditions, all such risks being known and appreciated by me. Having read, understanding this waiver and knowing these facts and in consideration of acceptance of this application, I, for myself and anyone entitled to act on my behalf waive and release the Center for Educational Advancement, Johanna Foods, Inc., the Borough of Flemington, USA Track & Field and all sponsors, their representatives and successors from all claims or liabilities of any kind arising from my participation in this event even though that liability might 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. I also understand that, participation in the 5K run involves assignment to me of a "Championchip", and that I will be charged a \$35.00 replacement fee if I fail to return the Championchip assigned to me by the end of the 5K Run.

(Signature in full) OR (Parent/Guardian signature if entrant is under 18 years of age) Date

PROCEEDS BENEFIT THE CENTER FOR EDUCATIONAL ADVANCEMENT, A NOT FOR PROFIT ORGANIZATION PROVIDING TRAINING, EMPLOYMENT & PLACEMENT SERVICES FOR DISABLED PEOPLE FOR OVER 32 YEARS