



4th ANNUAL JIMMY D Memorial 5K Run/Walk

Sunday, August 31, 2008

Rain or Shine

Memorial Stadium

Joyce Kilmer Avenue (between 9th & 12th Streets)
New Brunswick, NJ 08901

Proceeds from this event will benefit
The James D'heron Memorial Foundation

www.jimmyd5k.com

TOENTER

Mail form below with check payable to :

The James D'heron Memorial Foundation, Inc. and send to :

The James D'heron Memorial Foundation, Inc. c/o Erin Varga

P.O. Box 5115 - New Brunswick, NJ 08903

or Register online at www.jimmyd5k.com

EIN # 20-2822499

RACESCHEDULE

08/29/08 6 p.m. - 8 p.m. : Early Packet Pick-Up at Memorial Stadium

08/31/08 7:15 a.m. - 8:45 a.m. : Packet Pick-Up at Stadium.

9:00 a.m. : 5K run/walk START

10:00 a.m. : Free Kids Fun Run START

10.30 a.m. : Award Ceremony

10:00 a.m. - 2:00 p.m. : Post Race Activities including : BBQ*, Beer
Garden*, Music and Children's activities

*Free for all 5K participants

AWARDS

1st Place Male & Female Firefighters

1st Place Male & Female Police Officers

1st Place Male & Female EMS/EMT

1st Place Male & Female Military

1st Place Male & Female New Brunswick Residents

Top Three (3) Male and Female overall

Age Group Awards (male & female) • 14 and under to 75 and over (5 years)

TEAM Competition : Divisions FF/PO/EMT-EMS/Military - Top 3 Score

- 1st, 2nd & 3rd place awards - PRE-ENTRY ONLY

TEAM application available online at www.jimmyd5k.com

Results : www.compuscore.com

COURSE

The Jimmy D 5K is run on an out and back, USATF certified course with mile clocks, and a water station at Fire Headquarters. The race begins outside Memorial Stadium on Joyce Kilmer Avenue and finishes on the new stadium track.

RACECONTACTINFO

Erin Varga: 732.545.6729 or 732.803.5871. Email at info@jimmyd5k.com

ENTRYFEE

08/23/08 or Earlier PRE-Registration : \$20 | \$18 for USATF PRE-Registration

After 08/23/08 & on Race Day : \$25

ENTRYFORM'08

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

DOB _____ Age on race day: _____

10 Digit USATF # _____

Male / Female (circle one)

T-shirt size (circle one): **Small** | **Medium** | **Large** | **X-Large** | **XX-Large**

Firefighter | **Police Officer** | **EMS/EMT** | **Military** (circle one)

GETSPONSORED

Sponsor 1: _____ Amount: _____

Sponsor 2: _____ Amount: _____

Sponsor 3: _____ Amount: _____

FREE hooded sweatshirt with \$100 sponsorship **Total:** _____

MAKEADONATION

I would like to make a tax exempt donation to the James D'heron Memorial Foundation, Inc. In the amount of \$ _____

EIN# 20-2822499 The James D'heron Memorial Foundation is a non-profit 501(3)c organization

WAIVER: In consideration of this entry being accepted, I hereby myself, heirs, executors and administrators waive and release any claims I may have against the James D'heron Memorial Foundation, The Jimmy D 5K, The City of New Brunswick, their officers, volunteers, successors and assigns for injuries that may be suffered by me during this event. Further, I am physically able to participate in this event and grant the right to use my likeness in any photographic record of the Jimmy D 5K.

Signature of entrant or parent/guardian if under 18 Date _____

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