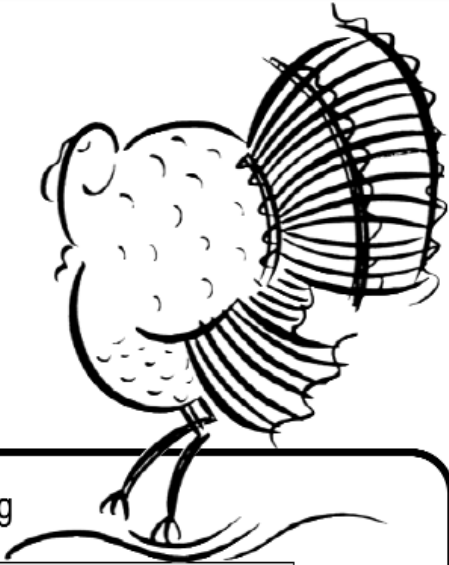




SOMERSET COUNTY PARK COMMISSION

# 13<sup>TH</sup> ANNUAL 5K TURKEY TROT



Walkers Welcome and 1 Mile Fun Run/Walk  
Saturday, November 15, 2008 (Rain or Shine)  
Colonial Park, Franklin Township

Register On-Line at [www.somersetcountyparks.org](http://www.somersetcountyparks.org)

**Race Day  
Schedule:**

Event	Race Registration & Packet Pickup	Start Time
1 Mile Fun Run Walk	8:00am to 8:50am	9:00am
5K Turkey Trot	8:00am to 9:15am	9:30am

**Registration Fees:** \$18 by November 7 (USATF members \$2 discount) / \$20 after November 12  
Note: Entry fee covers participation in one or both of the races.

**Long Sleeve T-Shirts:** To all pre-entrants and all on-site entrants while supply lasts.  
T-shirt size not guaranteed to on-site registrants.

**Awards:** Awards for the top male and female 5K finisher, and the top 3 male and female 5K finishers in each age group. No duplicate awards.

**Course:** Flat & Fast. Water stops. Race starts and ends in Colonial Park. Web site results at [www.compuscore.com](http://www.compuscore.com). Post-race refreshments and random prize drawing.

**Age Categories:** 14 and under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 and older.

**For more information call: 908 722-1200 ext 226 or visit [www.oymp.net](http://www.oymp.net)**



Return Registration and Entry Fee to:  
**Turkey Trot, Somerset County Park Commission, P.O. Box 5327, North Branch, NJ 08876**  
*Make checks payable to Somerset County Park Commission*

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Street Address \_\_\_\_\_ Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone# \_\_\_\_\_ T-Shirt Size: M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

Please register me in the 5K \_\_\_\_\_ 1 Mile \_\_\_\_\_ Both Races \_\_\_\_\_ USATF-NJ# \_\_\_\_\_

I hereby agree for myself, my heirs, my executors and administrators to waive any and all legal rights and claims for damages I may have against the coordinating groups, individuals and sponsors associated with this event, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with said event. Also, none of the above will be held responsible for loss of personal items or any other form of aggravation in connection with said event. I have been advised that I must be in good health to participate in the event. I give permission for the free use of my name and picture in any broadcast, telecast or printed media account of this event. I also hereby consent to emergency treatment in the event of injury or illness.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(If under 18, signature of parent or guardian)

**Sponsors:** Delta Dental; Miller, Robertson and Rogers, PC; PSE&G; The Reitman Group; The Reporter; Road ID; Runner's World; Starbucks; Stop and Shop; and Wegman's Food Markets