

Family & Friends for Freedom Fund Inc.

# Wounded Heroes

## 5K Run/Walk

Saturday, September 12, 2009

Mountain Lakes, NJ

*Description:* 5K run/walk through scenic residential area

*Why:* To benefit injured military men and women returning from overseas

*When:* Saturday, September 12, 2009

*Time:* Race starts @ 9am; registration starts @ 7:30am

*Where:* St. Catherine's Church corner of Pocono Rd. & Boulevard, Mountain Lakes, NJ

*Contact:* (973) 897-2237

*Amenities:* T-shirts, refreshments, music

*Awards:* Top 3 overall Male & Female runners;

Male & Female runners in age groups:

9 and under; 10-14; 15-19; 20-29; 30-39; 40-49; 50-59; 60-69; 70+

*Registration:* By Mail - FFFF, 40 Woodland Place, Pompton Plains, NJ 07444

Online - [www.injuredmarinesfund.org](http://www.injuredmarinesfund.org) or [www.compuscore.com](http://www.compuscore.com) or [www.raceforum.com/WoundedHeroes](http://www.raceforum.com/WoundedHeroes)

*Entry Fees:* USATF \$16; others \$18; \$20 after September 6<sup>th</sup> & day of Race



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## Wounded Heroes 5K Run/Walk

Last Name		First Name	Date of Birth	AGE on 9/12/09	USATF-NJ#
					Male <input type="checkbox"/> Female <input type="checkbox"/>
Street Address		Town/City	State/Zip		
Phone		E-mail	Group	Circle One Sm, Med. Lg, XL	
Amount enclosed \$ _____ (Make checks payable to Family & Friends for Freedom Fund, Inc.)					

**Waiver/Release:** I know that running a road race is a potentially hazardous activity. I should NOT ENTER and run/walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with this event included but not limited to falls, contact with other participants, the effect of the weather, traffic and the conditions of the road, all such risks being known and appreciated by me. In consideration for my entry I do hereby for myself, and anyone whose behalf I am entitled to act on, waive and release Family and Friends for Freedom Fund, Inc., the Borough of Mountain Lakes, all affiliates, volunteers, sponsors, agents and representatives or assignors for any and all damages sustained and suffered by my connection with my association or entry in this race.

\_\_\_\_\_  
Signature of participant or legal guardian if participant under 18 years old \_\_\_\_\_  
Date