

SAINT JOHN VIANNEY HIGH SCHOOL

Lancer 5 K RUN • 2010 Annual Fund Campaign Kick-Off

Where: Saint John Vianney High School
540 A Line Road Holmdel, New Jersey 07733

When: Sunday, November 7th, 2010 - Race starts at 9:30 AM

Registration: Starts at 8:00 AM - Registration Fee is \$30.00
Pre-Registration fee is \$25.00

Make checks payable to: Saint John Vianney High School

More Information: Contact Julie Pasquale @ Saint John Vianney
[732] 739-0800 ext 121 or pasquale@sjvhs.com
Rich Agnello [732] 566-7258 or agnello@sjvhs.com
or visit www.sjvhs.com or www.active.com

OFFICIAL ENTRY FORM

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIPCODE: _____

PHONE NUMBER: _____ CELL NUMBER: _____

EMAIL ADDRESS: _____

RACE DAY AGE: _____ GENDER: _____ MALE _____ FEMALE BIRTHDATE: _____

PERSON TO CONTACT IN CASE OF AN EMERGENCY: _____

CONTACT PHONE NUMBER: _____

PARENT SIGNATURE IF MINOR: _____

RACE DIVISION: 19 & Under 20-29 30-39 40-49 50-59 60-69 70-99

T-SHIRT SIZE: MEDIUM LARGE X-L Special Category: SJV Alumni SJV Student SJV Staff

Tee shirts guaranteed for the first 300 entries

Waiver for Race Application: I know that running a road race is potentially a hazardous activity. I should not enter and run 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 running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act upon my behalf, waive and release Saint John Vianney High School and all sponsors, their representatives and successors from all claims of liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence and carelessness on the part of the persons named in this waiver.

SIGNATURE: _____ DATE: ____/____/2010