



*West Essex Foundation for Education  
1st Annual 5K Run/Walk  
"Trotting for Technology"  
Celebrating 50 years of West Essex Excellence*

Date: **Saturday, May 21, 2011** Start Time: **9:00 a.m.**  
Place: **West Essex Regional High School**  
**65 West Greenbrook Road North Caldwell, New Jersey**

**Packet pick-up at West Essex Middle School:**  
Friday, 5/20 5:00pm – 7:00pm (*evening before event*)  
Saturday, 5/21 7:30am - 8:30am (*day of the event*)

**Entry fees:**

- \*\$20 for all West Essex Students/Alumni/Residents pre-registered
- \*\$25 for all non-residents pre-registered
- \*\$30 for all post registrants

\*This is a rain or shine event. If event is canceled due to events beyond our control, no refunds will be issued.

Make all checks payable to: **WEST ESSEX FOUNDATION FOR EDUCATION**  
Pre-registration: Mail or bring registration forms to:  
West Essex High School 65 West Greenbrook Road North Caldwell, New Jersey 07006  
Entries must be postmarked no later than May 1, 2011 to apply.  
***After this date we will only accept same day registration.***  
A race t-shirt will be given to all pre-registered runners and walkers.

Categories: Knights: 10 and under, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-up  
Lady Knights: 10 and under, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-up  
Awards: Trophies to 1st place male and female overall finishers  
Medals to 1st, 2nd, and 3rd place in each age group (*No duplication of awards*)

**Please note Run and Walk Course Map on back of flyer. Restrooms available on site.**  
For more information please contact: Irene Haramis (973) 403-1699 or [westessex5K@westex.org](mailto:westessex5K@westex.org)  
***Join us on Facebook: West Essex Foundation for Education 5K Run Trotting for Technology***

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One form per participant      Amount \$ \_\_\_\_\_ Check# \_\_\_\_\_ Date \_\_\_\_\_

Sex: M \_\_\_\_\_ F \_\_\_\_\_ Birth date: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Email: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone#: \_\_\_\_\_ Cell #: \_\_\_\_\_

Shirt size: YS \_\_\_\_ YM \_\_\_\_ AS \_\_\_\_ AM \_\_\_\_ AL \_\_\_\_ AXL \_\_\_\_

Age group- please circle one: 10 and under, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60- up  
In consideration of this entry being accepted, I hereby for myself, heirs, executors and administrators, waive and release any and all claims that I may have against West Essex Foundation for Education, West Essex Regional School District, First Aid Squads, or those representatives, successors, assignees, and any other sponsors of this event (hereafter to be known as the Group) for any injuries that may be suffered by me in this event. It is also understood by me that the group provides no insurance coverage for this event and I attest that I am in physical condition for this event. I also understand that I will not hold the group responsible for any publicity used concerning this event and that entry fees are non-refundable. I agree to allow pictures of myself to be used for promotional use.

\*Under 18 \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
(\*Requires parent/guardian signature)