



Belvidere's Second Annual

Fall Foliage 5K Run



**PRESENTED BY
BELVIDERE ARTS & EVENTS, Inc.**

**SPONSORED BY
DSM Nutritional Products**

To Benefit Belvidere School District

**Saturday, September 25th, 2010 Rain or Shine
Registration/Check-In begins at 8:00 - 9:15 am.
Race begins at 9:30 am.**

The course begins and ends at Garrett D. Wall Park / Belvidere Town Square, is relatively flat and takes you through both rural and residential streets. Awards and refreshments presented at finish. Comfort stations are available, no showers or lockers.

Entry Fees

\$15 .00 pre entry postmarked by September 12th includes t-shirt.

\$20.00 from September 13th to race day.

Make checks payable to: Belvidere Arts & Events Inc.

Running Awards

Awards to Overall Male and Female Winners

Awards to top three in each age category as follows:

14 and under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55- 59, 60-64, 65

Registration Forms available @ www.BelvidereNJ.com

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**Detach and mail this registration form with your payment to:
Belvidere Arts & Events, Inc., 518 Second Street, Belvidere, N.J. 07823**

Please enter me in the Fall Foliage 5K Run on September 25th, 2009. In consideration of this entry being accepted, I the undersigned, intending to be legally bound for myself, my heirs, executors, and administrators waive and release any and all rights and claims for damages I may have against the organizations holding this event, its agents, representatives, sponsors, officials, volunteers, and beneficiaries of this race of any and all injuries or health effects suffered by me in said event. I attest and verify that I am in excellent physical health and have sufficiently trained for this event. I assume all risks associated with running this event including, but not limited to falls, contact with other runners, and the effects of the weather (including heat or high humidity), traffic and the conditions of the road and the race path, all such risks known and appreciated by me. A parent or guardians must sign this form if applicant is under the age of 18 years of age.

Name _____ Age _____ Male _____ Female _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Email _____

Shirt Size (Check one): Small _____ Medium _____ Large _____ Xlarge _____ XXLlarge _____ XXXLarge _____

Signature _____ Date _____