

RACE DATE: September 25, 2010- Rain or Shine  
8 AM Registration 8:30 AM Race

**MOUNT LAUREL FALL FESTIVAL 5K RUN-REGISTRATION**

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

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

Phone \_\_\_\_\_ Age on day of Race \_\_\_\_\_

Email \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ (check one)

T-Shirt Size: XL L M S (circle one) Shirts are held for pre-registration runners only. Size as indicated or the next sizes available for the first 100 runners are guaranteed. Tee shirts for runners registering on the day of the race are subject to availability.

Fee-\$20.00 for pre-registration. \$20.00 the day of the race

**Make Check Payable to Mount Laurel Township**

Mail to: Mount Laurel Township  
100 Mount Laurel Rd.  
Mount laurel, NJ 08054

Attn: Ralph Giangiulio- 5k Race

**You must sign the Release Form of this application to complete registration**

**5K RUN RELEASE FORM**

In consideration of the acceptance of my entry, I hereby represent that I have read this application fully, have adequately trained to participate in this athletic event, understand the risks involved in strenuous physical exercise and therefore I assume the risks associated with participating in this event. I hereby for myself, heirs, executors and administrators waive and release all claims that I or they may have against the organizers of the event, the Mount Laurel Festival Committee, Mount Laurel Township, and all sponsors of this event.

I shall abide by all decisions of the race officials as final.

Runner's Signature: \_\_\_\_\_

Parent/Guardian if under 18: \_\_\_\_\_

Date: \_\_\_\_\_