



Tenaflly 5K Run
and Dog Walk
SUNDAY, JUNE 3, 2018

To benefit the
Tenaflly Educational Foundation
(a 501(c)(3) nonprofit organization)

Presented by the Palisades Running Club

Registration forms must be received by May 30 for below pre-race day pricing.
After May 30, registration must be in person at packet pick-up or race day events (at race day pricing)
For more information: www.tenaflly5k.com

<u>Event</u>	<u>Start Time</u>	<u>Fees</u>
5K Run	9:00am	___\$25.00 [Adult] ___\$20.00 [Under 18] ___\$23.00 [65 and over]
5K Dog Walk	9:05am	___\$25.00 [Adult] ___\$20.00 [Under 18] ___\$23.00 [65 and over]
<i>*Note: All dogs must be on <u>hand-held</u> leashes; no extended leashes are permitted. Please clean up after your dogs.</i>		
Dog Parade <i>Presented by the Tenaflly Veterinary Center</i>	10:00am	___\$15.00
Tiger Cubs Races <i>*Open to ages 6 and under</i>	10:00am	___\$15.00
1-Mile Fun Run <i>Presented by the Kaplen JCC on the Palisades</i>	10:30am	___\$15.00

Available discounts:

- ___ Palisades Running Club member (-\$2)
- ___ Englewood Hospital employees (-\$2)
- ___ Honda of Tenaflly employees (-\$2)
- ___ JCC on the Palisades employees (-\$2)
- ___ USATF member (-\$3) USATF #: _____

Optional donation to TEF: ___\$1000 ___\$500 ___\$250 ___\$100 \$ _____ other amount

Make checks payable to "TEF" and mail to Tenaflly 5K, PO Box 384, Tenaflly NJ 07670. **TOTAL:** \$ _____

NAME _____ MALE _____ FEMALE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

AGE ON RACE DAY _____ BIRTH DATE _____

TENAFLY STUDENT? Y/N SCHOOL (enter grade): ___ THS ___ TMS ___ MACKAY ___ MAUGHAM ___ SMITH ___ STILLMAN

HOW MANY YEARS HAVE YOU PARTICIPATED IN THE TENAFLY 5K? ___ 1ST TIME ___ NUMBER OF YEARS

Will you be attending our Free Pasta Party on Saturday, June 2 @5:30-8:00pm? Y/N # of people: _____

Waiver/Release: In consideration of the foregoing, I for myself, my executors, administrators and assignees do hereby release and discharge the officials, organizers, presenters, volunteers and sponsors of this run for injury or illness which may directly or indirectly result from my participation and I am in proper condition to participate. I further give rights of reproduction for publicity use of all photos taken of me at this event. I UNDERSTAND THAT NO REFUNDS WILL BE PERMITTED.

Signature _____ Date _____

If Participant is under 18: Please print name and relationship: _____

