

# Join Us for the 4th Annual NCBW-SNJ Obesity Prevention Women in Motion 5k/ 1 Mile Run/Walk & Free Health Screening (HIV, Blood Pressure, Cholesterol & Blood Sugar) Saturday, June 6, 2015

**LOCATION:** Gloucester Township Community Park  
380 Hickstown Road  
Sicklerville, NJ 08081

**TIME:** Registration begins at 8:00 am  
9:00 am - 1 mile walk  
9:30 am - 5k run/walk

**REGISTER ONLINE OR MAIL:** Make check or money order payable to:  
NCBW-SNJ, attn: Run/Walk, Box 4, Wenonah, NJ 08090  
Contact email - JCuprics@aol.com, 856-287-9461  
Online Registration:  
<https://runsignup.com/Race/NJ/Sicklerville/4thAnnualWomeninMotion5k1Mile#.VSBdtL9Ldso.mailto>

**REGISTRATION FEE:** Separate application required for each individual  
5k/1 mile Pre-registration (by June 4, 2015) -\$20  
5k/1 mile Race Day Registration - \$25  
5k/1 mile Family Registration (4) - \$50

Awards - Top 2 Males & Female Overall----- Special Award for Team with most entrants  
Amenities - Event T-shirts for first 50 Preregistrants

**ALL PROCEEDS TO BENEFIT SCHOLARSHIP FUNDS AND COMMUNITY PROGRAMS**

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**REGISTRATION FORM:**

Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Release and Waiver**

I assume full responsibility for my participation and I know that running a road race is a potentially hazardous activity and I should not enter unless I am medically able. I willingly agree to comply with terms and conditions for participation. I, for myself and on behalf of my heirs, assigns personal representatives and next of kin, hereby release indemnify, and hold harmless the NCBW-SNJ & Gloucester Township Park & Recreation, other participants and sponsors from any and all claims, demands, losses, and liability arising out of or related to any injury, disability or death I may suffer, or loss or damage to person or property. I have read and understand the foregoing Release and Waiver.

X \_\_\_\_\_ Date \_\_\_\_\_

Participants signature (if under 18, parent or gaurdian signature)

