About Alex's Lemonade Stand

Alex's Lemonade Stand Foundation (ALSF) shares the vision of our founder and creator, Alexandra "Alex" Scott—a cure for all children with cancer.

When Alex, who was diagnosed with childhood cancer just before her first birthday, was four, she told her parents she wanted to set up a front-yard lemonade stand. Her plan: to give the money to doctors to help them find a cure. Her first "Alex's Lemonade Stand", held with the help of her older brother Patrick, raised an astonishing \$2,000 in one day.

In 2004 when Alex passed away at the age of eight—her stand and inspiration had raised more than \$1 million towards finding a cure for the disease that took her life. Alex's Lemonade Stand Foundation was started by her parents in 2005 to continue the work that Alex began. Their mission is simple: to raise money for and awareness of childhood cancer causes—especially research into new treatments and cures—and to encourage and empower others, especially children, to get involved and make a difference for children with cancer.

Since Alex set up her first lemonade stand in 2000—truly exemplifying the saying "When life hands you lemons, make lemonade"— they have raised more than \$80 million. That money has helped to:

- •Fund more than 450 cutting-edge research projects
- •Create a travel program to help support families of children receiving treatment
- •Develop resources to help people everywhere affected by childhood cancer

Alex's Lemonade Stand Foundation is the living embodiment of Alex's spirit of determination and hope. Like Alex, we believe that every person can make a difference.

Sponsorships and Donations

Sponsorship offers and donations (both business and individual) are greatly appreciated.

Donations can be made/mailed to:

Alex's Lemonade Stand Foundation for Childhood Cancer 333 E. Lancaster Ave., #414 Wynnewood, PA 19096 USA

The Course

A fast, USATF certified, 5k course through the beautiful tree lined streets of New Hope (PA).

Directions to Race

184 W Bridge St, New Hope, PA 18938

From areas north:

Take 611 south.

Make left onto Durham Rd/Old Easton Rd/Route 413 Turn left at Church Ln/Route 202 and then left onto PA-263/US-202/York Rd Continue to follow Route 202 Bear right at W Bridge St/PA-179/York Rd School will be on left.

From areas west:

Head north on Route 263/York Rd Continue on Lower York Rd/Route 202 Bear right at W Bridge St/PA-179/York Rd School will be on left.

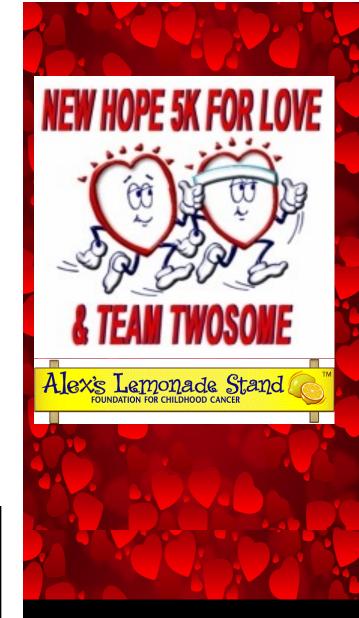
From I-95 South:

Take New Hope/ Yardley exit. Make left onto Taylorsville Rd. Make left onto River Rd./ Rt. 32 towards New Hope Make left onto W. Bridge St.

Register online at:

www.NewHope5k.com





SAT.- FEBRUARY 14, 2015

NEW HOPE-SOLEBURY HIGH SCHOOL

START TIME: 9:00 AM

Race Day Schedule

Race Date—February 14, 2015 (Saturday)

7:30 AM ... Registration (@ the park) 9:00 AM ... Start - New Hope 5k for Love (and Team twosome)

Awards & Prizes Following 5k Run

Start and Finish

New Hope/Solebury High School

Entry Fees

Solo Registrations:

\$25 Early registration—Postmarked by December 15th \$23 (USATF-NJ Member– Postmarked by December 15th) \$30 Registration (Postmarked December 15th—Feb 12th) \$35 Registration (Feb 13—Feb 14th)

Team Twosome Registration (2 person team): \$40Early registration—Postmarked by December 15th \$23 (USATF-NJ Member– Postmarked by December 15th) \$50 Registration (Postmarked December 15th—Feb 12th) \$60 Registration (Feb 13—Feb 14th)

T-Shirts to Pre- registered runners/walkers while supplies last

5K Run Age Groups (Male & Female)

14 and under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80 +

Awards and Prizes

5K Run:

- Top 3 male and female overall ٠
- Awards 3 deep in each age category .
- Awards to overall masters male and female .
- Top Teams in 7 categories (shown below:) . Married: MF, MM, FF Single: MF, FF, MM Parent/Child

Best Costume:

Solo / Team

Registration fee to run: \$25 per person thru Dec. 15, \$30 Dec. 15 - Feb. 12, \$35 Feb. 13-14 Teams of Two (\$40, \$50, \$60)

Racer 1:

S

Are you a solo registrant that would like to be paired with another runner so you can be in the team competition? Yes No

First Name:	Last Name:	
Street Address:		
City:	State:	Zip:
Phone: () Email:		
Gender (Please circle): Male Female	Birth Date:	_ Age on Day of Race:
Preferred Shirt Size (Please circle): S	M L XL	
USATF Members \$2 discount (Please	include your USATF #)

WAIVER/RELEASE: In consideration of this entry and being allowed to participate in this event, I hereby assume all risks and for myself, heirs, executors and administrators, I further waiveand release all claims and causes of action that I may have against Ship Shape Health and Fitness, LLC., Racing NJ., and their respective officers, directors, volunteers, employees, sponsors, agents and any other party involved in New Hope 5k For Love for any personal injuries, death and/or property loss I may suffer or in any way arising out of my participation in this event. I hereby certify that I am physically able to safely participate in the event and grant full permission to Ship Shape Health and Fitness, LLC and Racing NJ. to use and publish my name and image asa participant in photographs, video or other recordings connected with this event. All registration fees are non-refundable.

Signature: IMPORTANT! If the participant is under 18 years of age, the parent or gua		Date:
language above and all theterms and conditions of the minor's participation	in the event.	
Racer 2: What is your Team Name?:		
First Name:	Last Name:	
Street Address:		
City:	State:	Zip:
Phone: () Email:		
Gender (Please circle): Male Female	Birth Date:	Age on Day of Race:
Preferred Shirt Size (Please circle): S	M L XL	
USATF Members \$2 discount (Please i	nclude your USATF #)

WAIVER/RELEASE: In consideration of this entry and being allowed to participate in this event, I hereby assume all risks and for myself, heirs, executors and administrators, further waiveand release all claims and causes of action that I may have against Ship Shape Health and Fitness, LLC., Racing NJ., and their respective officers, directors, volunteers, employees, sponsors, agents and any other party involved in New Hope 5k For Love for any personal injuries, death and/or property loss I may suffer or in any way arising out of my participation in this event. I hereby certify that I am physically able to safely participate in the event and grant full permission to Ship Shape Health and Fitness, LLC and Racing NJ. to use and publish my name and image asa participant in photographs, video or other recordings connected with this event. All registration fees are non-refundable

Signature:

Date:

IMPORTANT! If the participant is under 18 years of age, the parent or guardian must sign here on behalf of the minor participant agreeing to the WAIVER/RELEASE language above and all theterms and conditions of the minor's participation in the event.

Mail Entry Forms to: Racing NJ 186 Pleasant Valley Road, Titusville, NJ 08560 Make Checks Pavable to: Ship Shape Health and Fitness For more information contact: Albert Siuta (973-960-5493)