

Glassboro 10 Miler & 5k

Dedicated to Browning Ross



Date: Sunday, February 22, 2015

Time: 1:00 pm (registration opens at 12:00 pm)

*Any runners who expect to run over 1 hour 45 minutes will begin the race at 12:30pm.
5k will start at approximately 1:05 pm

Location: Race will start near the track at Rowan University, Glassboro, NJ

Course: Accurate 10 mile course with some rolling hills through Glassboro and Pitman.
Excellent tune-up race for Caesar Rodney Half Marathon and St. Patty's day races.

Awards: Overall male and female. 1st place Masters male & female. Top 3 male & female finishers in the following age categories: 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over.

Amenities: T-shirts to the 1st 50 entrants. Post race buffet at Robison Hall, Rowan University. Post race raffle.

Entry Fee: \$20 pre-registration (before 02/16/2015). \$25 race day.
5k \$5.00 (no t-shirt)



Race info: Ringo Adamson 856-904-3543 or tuffgangrunning@yahoo.com

Directions: Take Route 55 to exit 50 (Route 322). Take Route 322 East to the 1st traffic light. Make a left onto Bowe Blvd. Cross over the railroad tracks. Make a right into the parking lot next to the track.

CHECKS PAYABLE: Tuffgangrunning
MAIL TO: c/o Derick Adamson
112 Nursery Drive
Glassboro, NJ 08028

ENTRY FORM – GLASSBORO 10 MILER

LAST NAME _____ FIRST NAME _____

Street _____ City _____ State _____ Zip Code _____

Phone w/area code _____ AM - PM Race Day Age _____ GENDER: _____

T-Shirt Size: _____ email address: _____

Waiver & Release . . . All Participants Must Sign

In consideration for accepting this entry, and the granting of the right to participate in this event, I, the undersigned, intending to be legally bound, hereby, for myself, my heir, personal representatives, successors, and assignees, waive and release any and all claims for losses and damages I may have against like Willis 5K organizers, Rowan University, Town of Glassboro, Partners, Officers, Sponsors, all representatives, successors, and assignees and/or any other person whomsoever for any and all injuries, illness, including death, that my result from my participation in said event. I represent and affirm that I am in proper physical condition to participate in this event, and verified by a licensed physician, and have sufficiently trained for the completion of this event. THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNED THIS RELEASE AND WAIVER.

Signature _____ Date _____
(Parent/Guardian Signature required if entrant is under 18 years of age)