

KAPLEN JCC on the Palisades



RUBIN RUN

MAY 14 2017

FOR SPECIAL NEEDS




Register online at jccotp.org/rubinrun or submit this form.

1/2 marathon 7:15 AM RACE START

- ☐ **\$65 EARLY BIRD 2/27-4/14**
13RRPR07W7
- ☐ **\$70 PRE RACE 4/15-5/13**
13RRPR08W7
- ☐ **\$75 RACE DAY 5/14**
13RRPR09W7

10k run 8:15 AM RACE START

- ☐ **\$25 EARLY BIRD 2/27-4/14**
13RRPR04W7
- ☐ **\$30 PRE RACE 4/15-5/13**
13RRPR05W7
- ☐ **\$35 RACE DAY 5/14**
13RRPR06W7

5k run/walk 10 AM RACE START

- ☐ **\$25 EARLY BIRD 2/27-4/14**
13RRPR01W7
- ☐ **\$30 PRE RACE 4/15-5/13**
13RRPR02W7
- ☐ **\$35 RACE DAY 5/14**
13RRPR03W7

We suggest participants arrive 1 hour prior to start of each race (especially for the 5K).

☐ Male ☐ Female ☐ Individual ☐ Team ☐ JCC Member ☐ Nonmember

Want your name printed on the bib? All registration & bib requests must be received prior to April 23.

Print name on bib ☐ My name **OR** ☐ Team name _____

☐ I would like to sponsor the Rubin Run ☐ Individual _____

☐ Team _____ in the amount of \$ _____.

Last Name _____ First Name _____ 2017 USATF NJ Number (For NBGP only) - \$3 Pre-Entry Discount _____

E-mail _____ Phone _____ Date of Birth _____ Age (as of race date) _____

Address _____ City _____ State _____ Zip _____

Please charge my ☐ VISA ☐ M/C ☐ AMEX Acct # _____ Exp Date _____ (CCV) Sec Code _____

☐ Yes, I will cover the 3% credit card processing fee ☐ Check enclosed in the amount of \$ _____

Name (as it appears on card) _____ Signature _____ Date _____

All registrations are final, non-refundable, and non-transferable. Giveaways while supplies last.

Rubin Run Release: In consideration of this entry being accepted, I hereby for myself, heirs, executors, and administrators, waive and release any claim I may have against the Kaplen JCC on the Palisades, the Boroughs of Tenafly, Englewood, Englewood Cliffs, its officers and directors, the organizing committee, the sponsoring organizations, the county of Bergen or their representatives, successors, or assignees for any injury that may be suffered by me at or in this event.

Date _____ Signature _____ Parent's Signature of consent (if entrant is under 18) _____

For information about the Rubin Run call Irene at 201.408.1472 or email rubinrun@jccotp.org.

