

Trophies Awarded in the following categories:

Individual Men & Women Runners:

9 & under / 10-14yrs / 15-19yrs / 20-29yrs / 30-39yrs / 40-49yrs / 50-59yrs / 60-69yrs / 70yrs & up

Running Teams or Groups:

(runners only) must have 3+ participants & registered by Oct 12, 2019 / submit name for team on all forms.

MAYOR'S TROPHY:

awarded to 1st place team in which all members live or work in Lincoln Park

REGISTRATION FEES

\$20 before October 1

\$25 October 1 - 16

\$30 October 17 - 19

Register on-line through Oct 16, 2019

[https://runsignup.com/Race/NJ/](https://runsignup.com/Race/NJ/LincolnPark/Beavertown5K)

[LincolnPark/Beavertown5K](https://runsignup.com/Race/NJ/LincolnPark/Beavertown5K)

(additional on-line charges apply)

Mail-in must be received by Oct 16

SAME DAY REGISTRATION FEE

\$30 cash or check

Submit entry form to:
Borough of Lincoln Park
Recreation

34 Chapel Hill Rd
Lincoln Park, NJ 07035

OR

register on-line at

[https://runsignup.com/
Race/NJ/LincolnPark/
Beavertown5K](https://runsignup.com/Race/NJ/LincolnPark/Beavertown5K)

Beavertown



DONATIONS ARE WELCOME

Mail to Borough of Lincoln Park - 5K

or donate on-line at:

[https://runsignup.com/Race/NJ/
LincolnPark/Beavertown5K](https://runsignup.com/Race/NJ/LincolnPark/Beavertown5K)

Lincoln Park **Mayor's Wellness Campaign**

2019 Beavertown

5K

Run / Walk

in Memory of

Joyce Stager

Saturday, October 19, 2019

Registration Opens: 8am

Race Starts: 9am

Borough of Lincoln Park
34 Chapel Hill Road
Lincoln Park, NJ 07035
www.lincolnpark.org

Race Director: JCassidy@bolp.org
973-694-6100 ext #2044

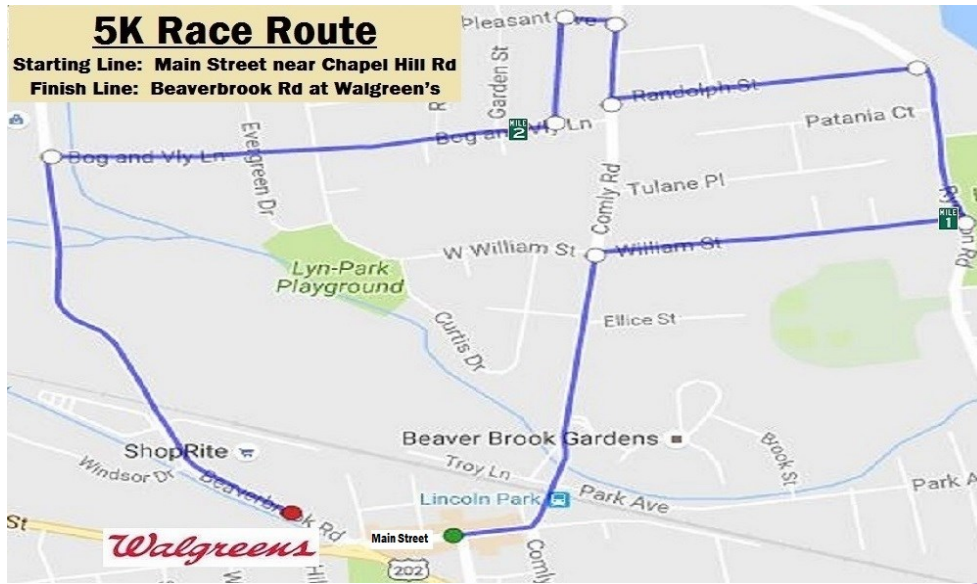
Lincoln Park Mayor's Wellness Campaign presents the 13th Annual 2019 Beavertown 5K Run / Walk in Memory of Joyce Stager

Proceeds to benefit P.V. Rotary Scholarship Fund, St. Joseph's Church, and LP Food Pantry

What: 5k Run or 2 Mile Walk
When: Saturday, October 19, 2019 / 5K start time: 9am
Time: Registration 8am - 8:30am
PAL/Community Center, 10 Boonton Tpk., Lincoln Park

Course: 5k & 2 mile walk begins on Main Street & Zeliff Place
Results by Compuscore / ONLY RUNNERS WILL RECEIVE BIBS FOR TIMED RESULTS

Registration Fee: \$20 before October 1 / \$25 October 1 - October 16
 \$30 October 17 - 19 (considered Same Day Registrations)
<https://runsignup.com/Race/NJ/LincolnPark/Beavertown5K>



Kids Main St. Dash
 Immediately BEFORE start of
 5K approximately 8:45am

2-MILE WALKER'S FITNESS ROUTE
 Your route ELIMINATES William St, Ryerson Rd,
 Randolph St, Pleasant Ave & Washington Ave.
 Walker's map is available at www.lincolnpark.org.

Entry Form for the Beavertown 5K Run/Walk Oct 19, 2019

Make Checks Payable to: "Borough of Lincoln Park - Recreation, 34 Chapel Hill Road, Lincoln Park, NJ 07035
 Mail this entry form and check to: Borough of Lincoln Park - Recreation, 34 Chapel Hill Road, Lincoln Park, NJ 07035
 Questions: Janet Cassidy 973-694-6100 ext 2044 or jcassidy@bolp.org FEES: \$20 before Oct 1 / \$25 Oct 1 - Oct 16 / \$30 Oct 17 - 19

Last Name: _____ First Name: _____ Male Female
 Address: _____ City/State/Zip: _____ circle one
 Date of Birth: _____ Age on 10/19/2019 _____ Adult Shirt Size S M L XL
 Phone # _____ Runner Walker Wheelchair
 _____ circle one

Waiver & Consent: I acknowledge that I am or my child is in suitable physical condition to participate in the recreation program, activity, sport, trip or event that I have registered for or have registered my child for & I hereby assume any risks involved by such participation. I certify that I am or my child is fully capable of participating in this recreational program, activity, sport, trip or event and that I do not have or my child does not have any physical or mental disability that would restrict full participation. For me & on behalf of my child, I do hereby waive, release, indemnify & hold harmless the Borough of Lincoln Park, its directors, superintendents, employees & volunteers from any liability &/or for any injury or damages that may be suffered by me or my child in the course of participation in the recreation program, activity, sport, trip or event & the activities incidental thereto, whether the result of any negligence or any other cause. In the event I am unable or unavailable to do so, I grant permission to receive or have my child receive emergency professional medical care as deemed necessary by the Recreation Staff. I agree to abide by the Rules & Regulations of the Lincoln Park Recreation Department & those of the venue that the Lincoln Park Recreation Department is visiting.

Photo Waiver Acknowledgement: Lincoln Park Recreation reserves the right to photograph attendees throughout the course of their events. As an attendee &/or on behalf of my child, I hereby grant permission to the Borough of Lincoln Park, its directors, superintendents, employees & volunteers to photograph me &/or my child & use the images solely for public relations purposes &/or the social media pages of the Borough of Lincoln Park. I do hereby waive, release, indemnify & hold harmless the Borough of Lincoln Park, its directors, superintendents, employees & volunteers from any liability &/or for any injury or damages that may be suffered by me or my child as a result of the taking or use of the photograph & images obtained in the course of participation in the recreation program, activity, sport, trip or event & the activities incidental thereto, whether the result of any negligence or any other cause.

Signature _____ Parent Signature (if under 18) _____