



Save the Date

Sunday, October 14, 2007



9th ANNUAL PARK RIDGE 5K RUN/WALK AND (New This Year!) KIDS' 1 MILE FUN RUN

To Benefit the Park Ridge High School Class of 2008

8:30 – 9:30 a.m. Event Registration and Packet Pick-Up at High School Mini-Gym (on Wampum Rd.)
9:00 a.m. Kids' Fun Run Starts
9:45 a.m. 5K Run / Walk Start
Awards: Top 3 Male and Female Overall and Top 3 M/F 10 and under, 11-15, 16-19, 20-29, 30-39, 40-49, 50-59, 60+; A Variety of Raffle Prizes will be given post race!!
T-shirts: Guaranteed to first 200 registrants
Directions: Start and Finish are at Park Ridge HS, 2 Park Ave., Park Ridge, NJ.

From the South: Garden State Parkway North to Exit 168. Turn right onto CR-502 / Washington Ave. Go ½ mile and turn left at light onto Pascack Rd. Go approx. 2.5 miles and turn right onto Wampum Rd. (just before 3rd traffic light – Park Ave.)

From the North: NY State Thruway to Exit 14A – Garden State Parkway. Take the School House Rd. exit toward Chestnut Ridge. Turn left at end of ramp onto Schoolhouse Rd. (later changes to Spring Valley Rd.) Go 1.5 miles to second traffic light. Turn left onto Grand Ave. Go 0.9 miles and turn right onto Pascack Rd. Go approx. 0.7 miles and turn left onto Wampum Rd. (just after first light – Park Ave.)

Registration Form

Register me in the _____ 5K _____ Health Walk _____ Kids' 1 Mile Fun Run

Entry fee: By mail received by 10/01: \$20.00 adults \$15.00 students under 18
 After 10/01: \$25.00 adults \$20.00 students under 18
 Kids' Fun Run: \$ 5.00

\$2.00 discount for USATF-NJ members

Amount Enclosed \$_____ (Please make checks payable to Op Grad 2008)

I cannot participate in the run, but would like to make a donation in the amount of \$_____

Last Name: _____ First Name: _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Male ___ Female ___ Date of Birth _____ Age on Race Day _____

Phone _____ ATF Number _____ Shirt Size: S M L XL

Please read carefully and sign Release and Waiver of Liability: In consideration of your accepting this entry, I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against Operation Graduation 2008, Park Ridge High School, the Park Ridge Board of Education, the Borough of Park Ridge, sponsors, their staff, officials, volunteers and any representatives, for any and all injuries to me in said event. I also give permission for the use of my name and/or picture in any newspaper, broadcast or other account of this event. Furthermore, I certify that I am physically capable of successfully competing in this event.

Signature _____

Date _____

If under 18, signature of Parent/Guardian _____

Mail completed application and payment to: Park Ridge H. S., c/o OpGrad 2008, 2 Park Ave., Park Ridge, NJ 07656

For further information, please contact Lura Antokal at 201-573-1819 or e-mail: pkrgopgrad5k@yahoo.com