

- T-shirt to all Participants •
- On-line Registration •
- Post-Race Party at the Crab's Claw Inn •
- Commemorative Glass to all Participants •



For more information and race updates, be sure to visit:

www.sbb8k.com

E-Mail: info@sbb8k.com
Phone: 732-830-3600

June 23, 2007 • 8:30am • Lavallette, NJ

To Benefit Save Barnegat Bay, Lavallette Emergency Services & the United Mitochondrial Disease Foundation

Race Information

About the Course

- Flat, fast, USATF certified 8K bay-front course
- Water Stations at every mile
- Two miles run along beautiful Barnegat Bay
- 2-mile Fitness Walk

Awards

- Top Male & Female overall
- Top Finishers in Standard Age Groups
- Egret Cup - 1st Island Resident (Point Pleasant down to Seaside Park) - Male & Female
- Post-Race Raffle

- Race to be held rain or shine •

Registration Information

Register for the Save Barnegat Bay 8K by mail, on-line, at Save Barnegat Bay or on race day.

8K Race

Pre-Registration, Postmarked on or before May 31st: **\$25**
Standard Registration, Postmarked June 1st and after: **\$30**
Race Day, June 23rd: **\$30**

Fitness Walk

Pre-Registration, Postmarked on or before May 31st: **\$18**
Standard Registration, Postmarked June 1st and after: **\$23**
Race Day, June 23rd: **\$23**

Check www.sbb8k.com for race information and updates

Packet Pickup

Race numbers can be picked-up beginning June 20th at Save Barnegat Bay Headquarters.

Race Week – June 20th - 22nd

Where: Save Barnegat Bay Headquarters:
906-B Grand Central Ave. (Rte. 35 North & Brown Ave.), Lavallette, NJ

When: Wednesday - Friday, 9:00am to 4:00pm

Race Eve, June 22nd

Where: Lavallette First Aid Squad,
Washington Ave. & Bay Boulevard

When: 5:00pm - 8:00pm

Race Day, June 23rd

Where: Lavallette First Aid Squad,
Washington Ave. & Bay Boulevard

When: Starting at 7:00am

----- detach here -----

Last Name _____ First Name _____ Age (on race day) _____

Address _____

City _____ State _____ Zip Code _____

() _____
Home Phone _____ E-Mail Address _____

How did you hear about our event?

NO REFUNDS

Non-Transferrable
U.S. Currency Only

Make checks payable to:

The Friends of SBB8K
PO Box 552 • Lavallette, NJ 08735

M F 8K FW S M L XL
Sex (check one) Event (check one) T-Shirt Size (check one)

Entry Fee \$ _____

Donation to The Friends of SBB8K .. \$ _____

TOTAL \$

LIABILITY AND PUBLICITY RELEASE: (Failure to sign with date will delay processing your application).

I know that running a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any and all decisions of a race official relative to my ability to enter and/or complete the run. I assume any and all risks associated with participating in the event including, but not limited to: falls; contact with other race participants; the effect(s) of weather including, but not limited to, high heat or humidity; traffic and conditions of the road; any and all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I, for myself and anyone entitled to act in my behalf, hereby waive and release the following: The Friends of the Save Barnegat Bay 8K, A New Jersey Nonprofit Corporation, & The Save Barnegat Bay 8K Road Race and their trustees, officers, agents, and race volunteers; Jersey Shore Running Club, and its officers, agents, members, and race volunteers; the Borough of Lavallette and its related agencies, departments, and employees; any and all sponsors and their representatives and successors, including the Road Runners Club of America, its officers, directors, agents and employees; from any and all claims and/or liabilities of any kind arising out of my participation in this event or the carelessness of the persons named in this waiver. Further, I grant to all of the foregoing the permission to use any photographs, motion picture recordings, and/or any other record of this event for any legitimate purposes. I understand that the event will be held rain or shine and no refunds will be issued.

Signature _____

Date _____

Signature of parent if athlete is under 18 years old _____

Date _____