

5-K HOLIDAY RUN/WALK

Help Beat Arthritis - The Most Common Cause of Disability in the United States

METUCHEN, NJ

SUNDAY, DECEMBER 6, 2009

START/FINISH LINE
NOVITA BISTRO & LOUNGE
25 New Street
Metuchen, NJ
Contact: Miriam Altomonte
t: 732.283.4300 X 320

PENNSAUKEN, NJ

SATURDAY, DECEMBER 12, 2009

START/FINISH LINE
CAMDEN COUNTY BOAT HOUSE
At Cooper River
7050 North Park Drive
Pennsauken, NJ
Awards; CONNIE MAC'S BAR & LOUNGE
Contact: Kaitlyn Woods
t: 856.616.8000

LAKE COMO, NJ

SATURDAY, DECEMBER 12, 2009

START/FINISH LINE BAR ANTICIPATION 703-5 Sixteenth Avenue Lake Como, NJ Contact: Darra Lipper t: 732,283,4300 X 331

JER\$EY CITY, NJ NEWPORT TOWN SOUARE

SUNDAY, DECEMBER 13, 2009

START/FINISH
NEWPORT SWIM
& FITNESS/RUNNERS HIGH
35 River Drive South, Jersey City
Awards: CHILI'S GRILL & BAR
425 Washington Boulevard
Contact: Miriam Altomonte
t: 732,283,4300 X 320

ENTRY FEES

\$20 till November 6 \$25 starts November 7

REGISTER ONLINE

Arthritis.org Keyword:New Jersey

MORE INFORMATION

Contact: Miriam Altomonte 732.283.4300 x 320 maltomonte@arthritis.org

AWARD\$ & PRIZE\$

- Top 3 Men & 3 Women in age group categories
- Top Fundraising Family Team
- Top Fundraising Corporate Team
- Largest Family Team
- Largest Corporate Team

Our Mission is To Improve Lives Through Leadership in the Prevention,
Control and Cure of Arthritis and Related Diseases



NEW JERSEY CHAPTER

200 Middlesex Turnpike—Suites 201 & 202 Iselin, NJ 08830-2000 t: 732.283.4300 f: 732.283.4633





This holiday season, the sounds of thousands of bells will ring through the air as people across the country tie jingle bells to their sneakers and join in the **Jingle Bell Run/Walk for Arthritis**. The Jingle Bell Run/Walk is a national signature event for the Arthritis Foundation where thousands of people come together to run, walk, and raise money to help fight Arthritis in more than 200 cities. However, it is more than just a 5K run/walk, it's a festive, holiday-themed event with costume contests, dog walks, and kiddie runs with ol' Saint Nick leading the way!

Each participant will receive:

- A Jingle Bell Run/Walk T-shirt
- Bells for your shoes
- "Beat the Cold" Goodie Bag
- Food and Drinks
- Awards Reception



| Please read, sign and send |
|---|
| I hereby certify that I, understand and will comply with all rules and regulations listed for the Arthritis Foundation New Jersey Chapter in conjunction with the Jingle Bell Run/Walk for Arthritis. I also understand that neither the Arthritis foundation, sponsors, other organizations and persons connected with this event, be held responsible for any injuries which me or my child may incur while taking part in this event, or as a result thereof. Therefore, I waive any claim against all of those listed above or in any affiliation with the Arthritis Foundation, for damages to my person, child or property. |
| My child and I are in proper physical condition to participate in this event. |
| ☐ I am in proper physical condition to participate in this event. |
| Signature:Date: |
| Parent Signature if participant is under the age of 18: |
| Date: |
| Photos of me and/or my child(ren) can be used for marketing and promotional purposes only. Yes No |

Please complete this form and mail or fax to the address and fax number listed on the front of this flyer to the Arthritis Foundation

| \$20 Prior to: 11-6-09 \$25 Starts: 11-7-09 through day of event | |
|---|--|
| \$25 Starts: 11-7-09 through day of event Please tell us about yourself Do you have Arthritis or a related disease? Yes No If yes, please list your type: Please check off T-shirt size: Small Medium Large X-Large XXL Youth S Youth M Youth L Youth XL Name: Address: Gity, State, Zip: Age: Gender: Male Female Telephone (H) | Registration Fees |
| Please tell us about yourself Do you have Arthritis or a related disease? | □ \$20 Prior to: 11-6-09 |
| Do you have Arthritis or a related disease? | □ \$25 Starts: 11-7-09 through day of event |
| If yes, please list your type: | Please tell us about yourself |
| Small | • |
| Address: City, State, Zip: Age: | □ Small □ Medium □ Large □ X-Large □ XXL |
| City, State, Zip: Age: | Name: |
| Age: Gender: Male Female Telephone (H) | Address: |
| Telephone (H) | City, State, Zip: |
| (H) | Age: Gender: ☐ Male ☐ Female |
| Email: What's YOUR Fundraising Goal! My pledge goal for this year is: \$ | · |
| What's YOUR Fundraising Goal! My pledge goal for this year is: \$ Please charge my registration fee as follows Payment type and amount of: \$ Cash | * Please indicate the best time to call: (time) |
| □ My pledge goal for this year is: \$ Please charge my registration fee as follows Payment type and amount of: \$ □ Cash □ Check □ MasterCard □ Visa □ Amex Acct.#: Exp: Signature: I will be participating in the following site: □ Novita Bistro & Lounge, Metuchen—12/06/09 □ Bar Anticipation, Lake Como—12/12/09 □ Camden County Boat House, Pennsauken—12/12/09 □ Chili's Bar & Grill, Newport Town Square,Jersey City - 12/13/09 Be VisibleBecome a Family, Group or Company Team! Team Name: Company: Address: City, State, Zip: Telephone (H) (W) Please indicate the best time to call: (time) | Email: |
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| Address: City, State, Zip: Telephone (H) | Team Name: |
| City, State, Zip: Telephone (H)(W) Please indicate the best time to call:(time) | Company: |
| Telephone (H)(W) | Address: |
| Please indicate the best time to call: (time) | City, State, Zip: |
| Email: | |
| | Email: |

TEAM CAPTAINS: Please send in all individual registration forms for each team member together with payments and a roster.