Don't forget the deadline! Sept 18th to pre-register

SOLES for All Souls (September 26)

13th Annual 5K RACE/2K Walk

All Souls Episcopal Church, 61 Main Street, Stony Brook, New York 11790 www.allsoulschurch-stonybrook.org

- Race packet pick-up: You can pick up your Race Packet/Bib, at The Reboli Center for Art and History, 64
 Main Street, Stony Brook, from 7:30-8:45 AM Sunday, Race Day! The race/walk begins promptly at 9:00am!
- Parking: Please Park in the Town of Brookhaven parking lot, adjacent to the Stony Brook Yacht Club (opposite the Three Village Inn ¼ mile North of the Church along Main Street) in the Village of Stony Brook.
- Awards: Post-Race award ceremony will be held at the *Reboli Center*, immediately after the event.
- Sponsors: If you are interested in *being a race sponsor* or contributing to the event, please contact: Dan Kerr at 631-655-7798 or eMail to: danielbkerr@verizon.net
- <u>Food Donation:</u> 'Lend a Hand –Bring a Can' Please donate canned food for the food pantry that we support at St. Gerard Majella Church in Terryville, NY.

For Office Use PLEASE MAIL THIS PFORM:	For Office Use
SOLES for All Souls Race, P.O. Box 548, Stony Brook, NY 11790.	R
CHECK# AMT. PLEASE PRINT CLEARLY ALL INFORMATION:	W
PLEASE PRINT CLEARLY ALL INFORMATION: FREE SOUVENIR TEE SHIRT FOR PRE-REGRISTRATION ONLY	
Divisions:	
□ Runner Individual \$30 (\$25 prior to 9/18)	
□ Walker Individual \$30 (\$25 prior to 9/18)	
□ Runner 18 or Younger \$15 ea. (\$10 prior to 9/18)	
□ Walker 18 or Younger \$15 ea. (\$10 ea. prior to 9/18)	
Runner College Student \$15 ea. (\$10 prior to 9/18)	
□ Walker College Student \$15 ea. (\$10 ea. prior to 9/18)	
Note: All children under 13 must be accompanied by an adult on race or walk.	
First Name: Last Name:	
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Malling Address:	
City: State: Zip:	
Date of Birth: Age: (as of race date)	
Date of Birth: Age: (as of race date) E-Mail: Phone:	
Date of Birth: Age: (as of race date)	
Date of Birth: Age: (as of race date) E-Mail: Phone:	
Date of Birth: Age: (as of race date) E-Mail: Phone: Sex: Male Female Tee Shirt Size: S M L XL XX PLEASE READ TWICE BEFORE SIGNING: THE SOLES FOR ALL SOULS CHURCH 5K/RACE 2K/WALK ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND INDEMNITY AGI	L
Date of Birth: Age: (as of race date)	REEMENT: ly physically fit to lly demanding and will indemnify and e listed rights and I
E-Mail: Phone: Sex: Male Female Tee Shirt Size: S M L XL XX PLEASE READ TWICE BEFORE SIGNING: THE SOLES FOR ALL SOULS CHURCH 5K/RACE 2K/WALK ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND INDEMNITY AGI I understand that the entry fee is non-refundable. I hereby certify that I recognize that challenges of this event and attest that I am adequate compete safely in this event. I understand the nature of this event and I certify that I am in sound health. I understand that this event is physical involves risks of bodily injury which includes permanent injury or death. I hereby release the All Souls Episcopal Church from all liability and shold harmless the Church from any and all expenses related to my participation. I understand that by signing this form I have waived the above	REEMENT: Ity physically fit to ally demanding and will indemnify and a listed rights and I be property owners, we suffered, even if aditions of any and assume all risks and
E-Mail:	REEMENT: ly physically fit to lly demanding and will indemnify and elisted rights and I eleproperty owners, see suffered, even if inditions of any and issume all risks and in as a result of my
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PLEASE READ TWICE BEFORE SIGNING: THE SOLES FOR ALL SOULS CHURCH 5K/RACE 2K/WALK ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND INDEMNITY AGI I understand that the entry fee is non-refundable. I hereby certify that I recognize that challenges of this event and attest that I am adequate compete safely in this event. I understand the nature of this event and I certify that I am in sound health. I understand that this event is physical involves risks of bodily injury which includes permanent injury or death. I hereby release the All Souls Episcopal Church from all liability and hold harmless the Church from any and all expenses related to my participation. I understand that by signing this form I have waived the above have signed this voluntarily. WAIVER: In consideration on my participation in this Race/Walk I, my heirs, executors and administrators release and forever discharge the race organizers, and any associated municipalities, all sponsors, individuals, other participants registered in this race for any injury that may be the injury was caused in whole or part by the negligence of said individuals, their employees, agents or representatives or by the dangerous cor all property in which the race activities are conducted including all injuries suffered by me while traveling to and from this event. I hereby as release all claims for damages causing death, personal injury, or property damage of any kind, which may occur, to me or to any other person participation in this event. Signature of Applicant Date	REEMENT: ly physically fit to lly demanding and will indemnify and elisted rights and I eleproperty owners, se suffered, even if aditions of any and assume all risks and in as a result of my