

Presented by:



Saturday June 8, 2019 at 9:00 a.m.
Registration, check in begins at 7:30 a.m.
Skylands Stadium
94 Championship Place., Augusta, NJ 07822

TROPHIES: TOP 3 MALE & FEMALE 5K PARTICIPANTS
 OVER 50 MEDALS Male/Female– 7-12, 13-14, 15-19, then 10 YR AGE GROUPS 20 - 80+
 FASTEST TEAM AWARD
 GRAND PRIZES – CHANCE TO WIN MANY PRIZES 10:30 A.M.

5K Participants receive SHORT SLEEVE T-Shirts & GOODIE BAG while supplies last.
 Start Line is in Parking lot of Skyland's Stadium, finishing at home plate.

5K run/walk Registration Fees:

\$25 Regular Registration (until June 1ST 11:59pm)
 \$30 through Race Day; Online registration closes Friday, June 7TH 12 noon
 \$3.00 Registration Discount for USATF-NJ Members by June 1, 2019
 \$20 Team Rate (registered teams of 5 or more by June 7th 12 noon) • \$15 Student rate (18 & under)

For information: Call Cassie Prisco 973-810-2853 or Email: OSCARRescue@yahoo.com
 Online Registrations visit www.OscarAnimalRescue.org ***Online Closes June 7TH Friday Noon***

 Age on Race Day _____ Birth date: ____/____/____ Male _____ Female _____ Shirt size: S M L XL XXL

Last Name _____ First Name _____

Street _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

2019 USATF-NJ# _____ Grand Prix Scoring only -Est. USATF Finish Time _____

Corp Coed Team of 5 or more Open Coed Team of 5 or more **Bib#** _____

5K Run/Walk _____ Team Name _____

Please make checks out to: **One Step Closer Animal Rescue**
 Enclosed Payment: Cash _____ Check # _____
Attn: Cassie Prisco / OSCAR 5K-9 P.O. Box 248 Sparta, NJ 07871

In consideration of your acceptance in the O.S.C.A.R. 5K-9, I, the undersigned, intending to be legally bound, for myself, my heirs, executors and administration, waive and release any and all right and claims for damages, and hold harmless, any sponsoring organization (Township of Augusta and Frankford, Main Street Marketing & Events, County of Sussex, Skyland's Stadium, Sussex County Miners, RunSignUp.com, and co-sponsors, their representatives, successors, agents, servants or employees, and assignees for any and all injuries suffered by me in said run. I recognize that I must be in good health and of sufficient training and experience in order to participate, and state furthermore, that my ability to participate in and successfully compete in this event has been attested to by a qualified physician or certified fitness consultant. I hereby grant permission to the O.S.C.A.R. 5K-9 to use photos that may include myself for promotion and publicity, and understand that if the Run cannot be held due to an act of God or circumstances beyond control, the Race is not liable to refund any money paid by me to participate. With my signature, I acknowledge that I have read and accept these terms under which my entry is made.

Signature _____

Date _____

Parent /Guardian for child under 18 years old