



BOYS & GIRLS CLUBS OF EDEN

5K Coffee Run

October 20, 2012 to Benefit

Breast Cancer Network of Western New York and Boys & Girls Club of Eden

Time/Location

9am registration
At Boys & Girls Club of Eden
8284 N. Main St., Eden

10:30 am start
At Eden Elementary School
8289 N. Main St., Eden

Walkers Welcome

Distance
5K (3.1 miles)

Entry Fees
\$20.00 Pre-register by
October 13, 2012
\$22.00 Register day of race
(entries close promptly
at 10:15 am.)

No entry fee for ages 75 and older

Awards

Awards to overall male and female winner. Male and female Awards for 1st, 2nd, & 3rd place in each age group.

Plus Best Costume Awards
No duplicate awards.

Age groups

14 & under	45-49
15-19	50-54
20-24	55-59
25-29	60-64
30-34	65-69
35-39	70-74
40-44	75 & over

Race Packet Info.

Race packets can be picked up from 8:00am-10:15am on day of race only.

Post Race Celebration

Immediately following the race. Join us at the Newell-Faulkner Post #880 American Legion 2912 Legion Drive, Eden for beer, water, food, and music.

General Info.

Race Director, Kim Schmitz
phone: (716) 445-0047
e-mail:
rk7993@roadrunner.com

Registration

www.buffalorunners.com
Print and mail application

Timing by Western NY
Finishline
John Beishline

T-shirts to the first 300 registered runners

Registration—Please send this entry form and registration fee to: Boys and Girls Club of Eden, 8284 North Main St., Eden, NY 14057. Make checks payable to: Eden Valley Brewing, Inc.

In consideration of your accepting this entry and permitting me to attend or participate herein, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators, waive release and forever discharge any and all rights and claims for damages I am now or in the future have against, the Town of Eden, Newell-Faulkner Post #880 American Legion, Boys & Girls Club of Eden, Breast Cancer Network of Western New York, and/or sponsors, volunteers, agents, members and assigns, for any and all losses and injuries in association with this event.

SIGNATURE: _____ DATE: _____

PARENTS SIGNATURE: _____ DATE: _____
(if participant is under 18 years of age)

NAME: _____ PHONE: (____) _____ AGE ON RACE DAY: _____

ADDRESS: _____ CITY: _____ STATE/PROV: _____ ZIP _____

IN CASE OF EMERGENCY CALL: _____ RELATION TO PARTICIPANT: _____

SHIRT SIZE: _____ male female

