

Friends of Night People

11th Annual "Putting
Hunger on the Run"
5K Fun Run & Walk



In Honor of Dr.
Charlie Sabatino

Saturday, May 3, 2014

<p>Time</p> <p>7:30am Registration at D'Youville College's College Center, 320 Porter Avenue</p> <p>9:00am Race at Niagara & Vermont</p> <p>Entry Fees</p> <p>\$20</p> <p>\$15.00 D'Youville - Students/Faculty</p> <p>Age Groups</p> <p>Classes: Male/Female</p> <table border="0"> <tr> <td>12-15</td> <td>16-19</td> <td>20-24</td> <td>25-29</td> <td>30-34</td> <td>35-39</td> </tr> <tr> <td>40-44</td> <td>45-49</td> <td>50-54</td> <td>55-59</td> <td>60-64</td> <td>65-69</td> </tr> <tr> <td>70-74</td> <td>75-79</td> <td colspan="4">80 & over</td> </tr> </table> <p>Certified By</p> <p>U.S.T.F Course—Certification #NY04008AM</p> <p>Post Race Party</p> <p>Donate Your Old Running Shirts!</p> <p>Awards for:</p> <ul style="list-style-type: none"> • Oldest shirt, most shirts, & farthest away race shirt <p>Shirts will be collected at 320 Porter Avenue, outside registration.</p>	12-15	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80 & over				<p>NEW THIS YEAR:</p> <ul style="list-style-type: none"> • Race Packet Pick Up & Chicken BBQ 2:30-6:30pm Thursday, May 1 D'Youville College Center \$10 for 1/2 Chiavetta's Chicken Dinner, rolls, 2 sides & drink. Hosted by D'Youville Student Physician Association. Proceeds to FONP. Pre-Order by emailing spaadyc@gmail.com. • D'Youville Chiropractic Department will offer services to runners following race. <p>For more Information: www.FriendsofNightPeople.com Race Director: John Abbarno Phone: (716) 884-5375 Email: NGawel@friendsofnightpeople.com <i>...Timing By WNY Finish Line Services...</i></p>
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Make checks payable to:
Friends of Night People, Inc.
C/O 2014 "Putting Hunger on the Run" 5K
Fun Run & Walk
394 Hudson Street, Buffalo NY 14201

Open to beginner, intermediate & advanced runners & walkers. Trophies will be given for overall winners and first place finishers in each age and class categories; medals for second and third place.

Please Print Clearly-----

Name: _____ Department: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail Address: _____ Phone: _____

Age on Race Day: _____ Gender: Male _____ Female _____ T-shirt size: S M L XL 2XL

American Currency Only, Please.

I will participate in the Run / Walk Payment Enclosed \$ _____

I can not participate in this event, however I would like to make a donation \$ _____

Waiver: In consideration of accepting this entry, I hereby, for myself, my heirs, and administrators, waive, and release any and all of my rights and claims for damages I might have against the organization holding this event, Friends of Night People, the City of Buffalo, their agents, representatives, successors, and sponsors for any and all injuries suffered by me at this event.

Participants Name (Please Print) _____
Date _____

Participants Signature/ Parent or Guardian's Signature _____
(if under 18)