

9TH ANNUAL SOUNDS OF SILENCE 5K RUN

FOR PREGNANCY AND POSTPARTUM DEPRESSION/ANXIETY AWARENESS

In Memory of Lisa Mary Reilly



REGISTRATION

EVENT DETAILS

Date: Saturday April 29, 2017
Registration: 8:00am - 9:00am
Race: 9:30am
Weather: Rain or Shine
Location: Jones Beach State Park Parking Field 5
 Wantagh, New York
Note: 5k run, walk, stroller-walk along scenic boardwalk course along the Atlantic Ocean.

MAIL-IN PRE-REGISTRATION DEADLINES & FEES

Mail-in Pre-Registration Deadline: April 21st
 Adult: \$25
 Adult Team Member/Captain: \$25
 Adult Stroller-Walker, Jogger
 Team Member/Captain: \$25
 Ages 11-18: \$15
 Ages 11-18 Team Members/Captain: \$15
 Ages 10 and under: \$5
 Virtual Runner (not attending) \$30
Note: \$5 additional registration fee after April 21st

AWARDS, RAFFLES, REFRESHMENTS & MORE

AWARDS: Overall male • Overall female
 Top 3 Male & Female awards for various age groups.
 Top Fundraiser (Individual and Team).
 Commemorative T-shirts for first (250) entrants.
 Race swag bag (to first 500 registrants).
 Pre and Post-race refreshments and snacks.
POST RACE RAFFLE: Designer products, gift certificates, gift baskets and more.
*****PARTICIPANTS NEED TO BE PRESENT TO WIN.*****

ONLINE & MAIL REGISTRATION INFORMATION

Register, Form a Team, Fundraise online:
www.elitefeats.com/upcoming
 Race Name:
 9th Annual Sounds of Silence 5K Run
 Wantagh, NY
MAIL IN REGISTRATION: MAKE/SEND A CHECK PAYABLE TO:
 Postpartum Resource Center of New York
 109 Udall Road, West Islip, NY 11795
 postpartumny.org - 631-422-2255

Please indicate which apply:
 Run [] Walk [] Stroller/Walk [] Team Captain: _____ Team Name: _____

Last Name: _____

First Name: _____

Street Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

DOB: _____ / _____ / _____ Age (at time of race) _____

Gender: _____ F [] _____ M [] _____

Email: _____

Applicant's Signature: _____

Signature of Parent/Guardian if under age 18: _____

T-Shirt Size					
ADULT					
S []	M []	L []	XL []	2XL []	3XL []
YOUTH					
S []	M []	L []	XL []	2XL []	3XL []

I hereby waive all claims that I may have now or in the future, of every nature against The Postpartum Resource Center of New York, Inc., The People of the State of New York, The New York State Office of Parks, Recreation and Historic Preservation, The Long Island State Park, Recreation and Historic Preservation Commission, their commissioners, officers, agents, and employees, Elite Feats, Inc., all organizers, officials, volunteers, sponsors, and any other participating agencies with respect to any personal loss, illness, bodily injury, hazardous health conditions, or death I might suffer as a result of my participation in this event. I understand that participating in The Postpartum Resource Center of New York, Inc.'s, Sounds of Silence 5k (Run, Walk, Stroller-Walk with Kid's Fun Run) involves a strenuous activity, which I am physically capable of undertaking. I also fully understand the rigors of such competition and have prepared myself physically for the race. I represent that I have received no restrictions on such activity from any physician and attest I am physically fit for this event. I agree to follow the rules which govern road racing. I, the undersigned, have read the above waiver and release, and understand that I have given up substantial rights by signing it, and sign it voluntarily. I grant full permission for event organizers to use in promotional materials presented in any medium, my name, likeness, image, voice, photographs, videotapes or quotations. This permission is perpetual and worldwide.