The Order of the Friendly Sons of the Shillelagh of the Jersey Shore

7th Annual Shillelagh 5k Race and 1 Mile Walk

This year we will be raising funds and dedicating the race to Pat Magovern, one of the founders of the Shillelagh 5k Race & Walk. Pat was a police officer with the Borough of Belmar for over 30 years, retiring as Captain, as well as a beloved brother of the Order of the Friendly Sons of the Shillelagh of the Jersey Shore. We will be raising funds for St. Rose Grammar School and PBA 50 in his memory and the remainder of the funds will go towards funding the Shillelagh Education Fund, which provides college scholarships to local applicants and helps individual people in need.

DATE: Saturday, October 2, 2021
TIME: 5k Race 9:00am. 1 Mile Walk 9:05am
LOCATION: Bar Anticipation, 703 16th Avenue, Lake Como, NJ

Entry Fee: $30 Pre-Registration by 09/10/2021 - $35 after 09/10/2021
Kids Under 12: $10 Pre-Registration by 09/10/2021 - $15 after 09/10/2021
All registered runners will get a long sleeve t-shirt ♦ Race will be professionally scored
Race Day Registration begins at 7:30am

FREE BBQ at Bar Anticipation to all participants that begins at 10:30am
PRIZES: Top Three Male & Female and Top Three Shillelagh Members.
Prizes for the top runner in each age group.

Contact: Bill Ryan, email info.fsosbelmar@gmail.com
Register on-line at jsrc.org or runsignup.com

Last Name: First Name: Age: Sex:

Address:

City: State ZIP Code:

Phone# Email:

Circle Event: 5K Run 1M Walk Circle Shirt Size: YM YL S M L XL XXL XXXL

Shillelagh Member? (circle) YES NO Youth Adult

Registration Fee $ _____ Optional Additional Donation $ _____

Waiver of my rights to make claim for illness and/or injury
In consideration for my being permitted to participate in the racing event, I hereby waive and relinquish all of my rights to make a claim or file a lawsuit for any injuries and/or Illness that might happen to me during or after this racing event. I fully understand that the Friendly Sons of the Shillelagh of the Jersey Shore is merely sponsoring this racing event as a charity function of the club. I understand the Friendly Sons of the Shillelagh of the Jersey Shore has not made an inspection of the racing course. I further state that I am not relying on any representations of the Friendly Sons of the Shillelagh of the Jersey Shore, either express or implied, as to the nature or quality of the racing course concerning terrain and/or conditions of the course. I understand that participation in a race that is run on municipal streets and or sidewalks has conditions on the ground that includes potholes, depressions and other uneven surfaces and is utilized by other individuals in motor vehicles, on bicycles, pedestrians, etc. that may cause me injury. I hereby release the Friendly Sons of the shillelagh of the Jersey Shore from all anticipated and unanticipated events that might hurt me.
I also know that running a road race or walking for any distance is a potentially hazardous activity and that I should not enter and run or walk unless I am medically able and properly trained. I agree to abide by any race official relative to my ability to safely complete the run/walk. I assume all risks associated with running and walking this event including but not limited to falls, contact with other participants, the effect of the weather, including low or high temperatures and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, myself and anyone entitled to act on my behalf, waive and release the Friendly Sons of the Shillelagh of the Jersey Shore, its Officers, Members and race volunteers, the boroughs of Belmar, Lake Como and Spring Lake and it's Departments and employees, Jersey Shore Running Club, Bar Anticipation and all sponsors and their representatives, employees and successors from any and all claims and liabilities of any kind arising out of my participation in this event or carelessness of the persons named in this waiver. Further, I grant to all of the forgoing to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes.

Signature_____ **Date**_____

Participant signature (or parent/guardian if under 18). Must be a signature here.

Return Completed Form with check made payable to the FSOS Foundation - 5k
Mail to FSOS Shillelagh 5k, PO Box 1226, Belmar, NJ 07719