



Ventnor City Firefighters FMBA Local 38

*in Association with the Ventnor City Board of Recreation
Seventeenth Annual*

Kenny Wayland Memorial Run

to Benefit

Kenneth Wayland Memorial Scholarship Fund

Sunday May 29, 2016

Time: 9:00 a.m.

Course: Certified course. Out and back on Atlantic Ave.
Also: Fun Walk on Boardwalk

Fee: Pre registered: ON LINE: \$15 by 4/30/16 (includes T Shirt) / \$20 by 5/26/16
IN PERSON: \$15 by 4/30/16 / \$20 by 5/28/16 / \$25 day of run
(T-SHIRTS WHILE SUPPLIES LAST).

Registration: Pre registered: On-Line at <http://www.ibsportstiming.com/> by 5/26/16. In person or via mail by 5/28/16
Day of race: 7:30 to 9:00 am at Ventnor Community Building.
PICK UP OF RACE PACKETS & REGISTRATION available 5/28 6:00 TO 7:30 PM AT THE VENTNOR COMMUNITY BUILDING-6500 Atlantic Ave. Ventnor City, NJ
INFO: Phone: (609) 823 7942 or E Mail: FMBA38@AOL.COM
Facebook: VCFD Ken Wayland Scholarship Run

Awards: Trophies/Medals for various divisions including Firefighters Division

Ceremony: Ventnor Community Building, Newport Ave. & Boardwalk

Pre Registration: (via mail by 5/28/2016) to: Wayland Run
c/o Ventnor City Fire Department
20 N. New Haven Ave.
Ventnor City, NJ 08406

Make check payable to: WAYLAND SCHOLARSHIP FUND

ENTRY FORM

(please print all information legibly)

In consideration of accepting this entry, I the signatory, assume full responsibility for any injury or accident which may occur during the event or while I am on the premises of the event. I hereby hold harmless the City of Ventnor, any sponsor, promotion, event supervisory personnel & representatives & all other persons associated with this event. I verify that I am physically fit & am sufficiently trained for this event & my physical condition can be verified by a medical doctor. I also understand & agree that the organizers may use for publicity or promotional purposes my name and/or photographs, videotapes, television broadcasts, motion pictures & recording of me participating in this event without obligation to me. I understand that entry fees are not refundable.

Name: _____ **E-Mail:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Event: (circle one) **5K** **10K** **Fun Walk**

Sex: ____ **Age:** ____ **T-shirt Size (circle one):** **S** **M** **L** **XL** **Firefighter:** **Yes** **No**

Sign/Date (Parent/Guardian if under 18):

X _____

On Line Registration Available @: <http://www.ibsportstiming.com/>