



THE AL MACKLER CANCER FOUNDATION ANNUAL RUN
Stephan Jonas 1 Mile Walk

Proceeds Benefit Pediatric Cancer Research at
 Hadassah Hospital in Israel, Memorial Sloan Kettering Hospital &
 St. Jude's Children's Research Hospital

Sponsored by Janney Montgomery Scott LLC,
 Bernie Robbins Jewelers, & Create~A~Frenz....eee.

The Honorable Frank LoBiondo, Honorary Chairperson

The Atlantic City Hilton, Sunday July 27th 2008 at 7:30 am SHARP



5K RUN

1 MILE FUN RUN

1-MILE WALK

50-YARD DASH FOR KIDS

**Starts at the Atlantic City Hilton
 Boston Avenue & the Boardwalk**

Prizes by age group ~ Awards in all age group categories for
 1st, 2nd, 3rd place. T-shirts for the first 175 people who
 Pre-register and on race day as available.

Award Presentation Immediately Following the Races

Register Early

Entry fee: **\$20 Pre-registration**
\$25 on the day of the race
Registration at 6:30am

GRAND PRIZE COMPLIMENTS OF
BERNIE ROBBINS
 FINE JEWELRY
GIFT CERTIFICATES FROM:
**AREA RESTAURANTS, MERCHANTS
 AND LOCAL GIFT SHOPS.**
**Have your name on the official race
 t-shirt for \$100-\$1000 donation.**

Make all checks payable to: The Al Mackler Cancer Foundation

For more information, call Ruth at (609)823-5699 or email to gcarlino@jmsonline.com

Make entry form and check payable to: **The Al Mackler Cancer Foundation, C/O JMS, 401 New Rd.,
 Suite 200, Linwood NJ 08222**

NAME _____ AGE ON RACE DAY _____ 5K RUN _____

ADDRESS _____ SEX(M/F) _____ 1-MILE RUN _____

CITY _____ STATE _____ ZIP _____ 1 MILE WALK _____

PHONE () _____ T-SHIRT SIZE (S) _____ (L) _____ (XL) _____ 50 -YD DASH _____

NO REFUNDS

Waiver of liability: Waiver must be signed by all entrants. In consideration of the acceptance of my entry, I, for myself, my executors, administrators and assigns do hereby release athletes korner sports, Janney Montgomery Scott LLC, The Al Mackler Cancer Foundation, Hilton Hotel Casino, Atlantic City, all sponsors, volunteers, organizers ad supporters from all claims, demands, suits or actions whatsoever in any manner for injuries or damages I may sustain as a result of my participation. I attest I have full knowledge of the strenuous nature of this event and am medically able to participate and I am willing to assume all risks involved. I also give my permission for free use of my name and picture in any broadcast, release or print media account of this event without compensation. (Parent signature if under 18).

NO DUPLICATE AWARDS

SIGNATURE _____ DATE _____