



EAST BROOKLYN 5K RUN/WALK SATURDAY, SEPTEMBER 16, 2017

REGISTRATION FORM

DATE:												
NAME:												
ADDRESS:												
EMAIL ADDRESS:												
TELEPHONE #:												
DATE OF BIRTH:												
PARTICIPANT:		RUNNING			WALKING			SPECTATOR				
COMMUNITY PARTNER/TEAM:												
SHIRT SIZE (CHECK ONE)		SMALL		MEDIUM		LARGE		XL		XXL		XXXL
GENDER		MALE			FEMALE							
EMERGENCY CONTACT NAME												
EMERGENCY CONTACT TEL #												
AMOUNT RECEIVED		\$10 early registration					\$20 registration					
RECEIVED BY:												
PRINT NAME												
SIGNATURE												



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