THE SEVENTH ANNUAL MARCIA LEMKIN FOUNDATION RACE AND WALK TO CONQUER LUNG CANCER STARTING AT JFK PLAZA/CITY HALL, LOWELL, MA SUNDAY, AUGUST 30, 2009 8:30 AM REGISTRATION • 10:00 AM RACE AND WALK

Race and Walk are each 5K in distance.
The race will be hosted by the Greater Lowell Road Runners/Race. Results will be posted.

OFFICIAL REGISTRATION FORM

Please fill out this form completely and return to the Marcia Lemkin Foundation, 440 Middlesex Road #233, Tyngsboro, MA 01879, with check for entry fee made payable to the Marcia Lemkin Foundation or bring this form and check with you on the day of the walk. This event will benefit lung cancer research, treatment, and prevention programs at Brigham And Women's Hospital. Your contribution is tax deductible. One person per registration form. Copies can be made for additional participants.

Free Short-Sleeve Technical Jersey to each of the first 175 persons registering prior to the day of event!

REGISTRATION

To register, complete the form and mail today; with check, or bring the form and check with you on the day of the race/walk. (Please Print). *Race and walk registration fees are $18.00 per person prior to day of event & $23.00 per person on the day of event.*

I am registering for the 5K Race ☐ 5K Walk ☐ Enclosed $ _____

I would like to make an additional donation to the Marcia Lemkin Foundation Enclosed $ _____

Total $ _____

Mr. ☐ Mrs. ☐ Ms. ☐

First: _____ MI: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

E-Mail: _____

Age on Date of Event: _____

Employer: _____

Employer Address: _____

City: _____ State: _____ Zip: _____

My Company has a matching gifts program: Yes ☐ No ☐

Jersey Size: XS ☐ S ☐ M ☐ L ☐ XL ☐

In consideration for this entry being accepted, I, and on behalf of my heirs, executors & assigns, do forever release The Marcia Lemkin Foundation to Conquer Lung Cancer, Inc. & its directors, officers, agents and volunteers, the City of Lowell, The Greater Lowell Road Runners & any others associated with this event from any claims whatsoever resulting from my participation in this event. I understand the risks associated with this event. I attest that I am Physically fit to participate in this event. I grant full permission for the organizers to use photographs of me in legitimate accounts and promotions of this event.

_____ _____

Parent or guardian's signature if under 18 years of age Signature