



SATURDAY, OCTOBER 10, 2009  
SANDY HOOK, NEW JERSEY

READY...SET...CURE.

**TWO WAYS TO REGISTER:** 1) Go to [www.RaceForum.com/WCD](http://www.RaceForum.com/WCD) (no extra fees) to register online *or*  
2) Mail check and entry form to: Monmouth Medical Center Foundation, 300 Second Ave, Long Branch, NJ 07740

LAST NAME  FIRST NAME

STREET ADDRESS

CITY  STATE  ZIP CODE

PHONE  E-MAIL

DATE OF BIRTH  AGE  SEX  M  F

SHIRT SIZE (CIRCLE ONE) S M L XL XXL

**CHECK APPROPRIATE LEVEL (Choose one from each line below)**

- 1)  A-Expert  B-Intermediate  C-Novice  
2)  Individual  Team  Volunteer

**PRE-REGISTRATION (POSTMARKED BY 8/31/09)**

**LATE REGISTRATION (9/1-9/21/09)**

INDIVIDUALS: \$100 \$150  
TEAM: \$150 \$200 (Bike or Runner)

*Registration Pick-up:* 9/26 from 10am-12pm • McLoone's Rum Runner, Sea Bright

**APPLICANTS MUST SIGN WAIVER:**

I certify that I have read the contents of this registration for The Women's Council "Duathlon 2009," sponsored by the Saint Barnabas Health Care System and Monmouth Medical Center Foundation. I have been informed of and understand the risks that may be associated with my participation in the Duathlon and I do hereby assume full and complete responsibility for my actions. I hereby release and hold harmless the Saint Barnabas Health Care System, its affiliates, the Monmouth Medical Center Foundation, its staff, agents from all liability related my participation in "Duathlon 2009." I also hereby grant permission to take photographs of me and I hereby release and hold harmless, Monmouth Medical Center, Monmouth Medical Center Foundation, its officers, agents and employees from any and all liability related to the taking and the use of such photograph(s).

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent (if under 18) \_\_\_\_\_

\_\_\_\_\_ My payment is enclosed. (Make checks payable to MMCF/Duathlon.)

\_\_\_\_\_ Charge (Check One)  Visa  MasterCard  Amex  Discover

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

ONE ENTRY PER APPLICATION • THIS MAY BE REPRODUCED • NO REFUNDS, EXCHANGES OR TRANSFERS

**DUATHLETE'S CHECK LIST**

- Entered the correct race
- Check or money order to: MMCF, 300 Second Avenue, Long Branch, NJ 07740
- Completed and signed registration form
- Selected shirt size indicated
- Marked calendar: Saturday, September 26<sup>th</sup> for Registration Pick-Up