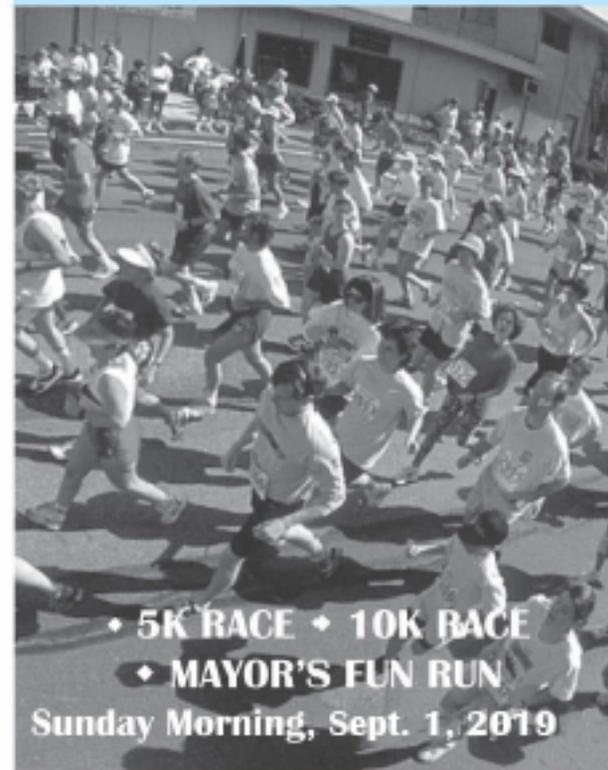




24th Annual
**Woodbridge
CROSSROADS
of NEW JERSEY**



♦ 5K RACE ♦ 10K RACE
♦ MAYOR'S FUN RUN
Sunday Morning, Sept. 1, 2019

BANK OF WOODBRIDGE
DIVISION OF BCB COMMUNITY BANK



34 Main Street, Woodbridge, NJ 07095
732-636-0077
www.bcbcommunitybank.com

TOWNSHIP OF WOODBRIDGE
ONE MAIN STREET
WOODBRIDGE, N.J. 07095



Hosted By

Mayor John E. McCormac
The Mayor's Council on
Physical Fitness & Sports
and
The Club at Woodbridge



Sunday, September 1, 2019

7:00 am All Registrations open
9:00 am 5K & 10K Race starts
10:45 am Lollipop Races start

Race courses are USATF certified

**Race starts and finishes
at Alvin Williams Park, Sewaren**

- Water will be available at the start/finish and along the route
- Race will take place rain or shine
- T-Shirts will be guaranteed to all 10K, 5K, Fun Run pre-registered runners (postmarked by 8/31/19) and late entries while supplies lasts.
- Refreshments will be available to all runners.
- Results will be mailed by CompuScore.
- For information, please contact: Runners High, 454 Main St., Metuchen, NJ (732) 549-9440
Email: runnershigh454@aol.com



**REGISTRAR
IN PERSON**
at
"Runners High"
454 Main St.,
Metuchen
(732) 549-9440
Ask for Rob

Lollipop Races

Children up to age 10 are invited to run in one of many lollipop races in their respective age groups. All participants are winners and receive lollipop prizes as parents and friends await runners at the finish line. Medals and lollipops to all finishers.

AWARDS

10 K - OVERALL 5 K - OVERALL
MALE & FEMALE MALE & FEMALE

*JOSEPH A. WARD MEMORIAL TROPHY
AWARDED TO 1ST MALE/FEMALE
WOODBIDGE TOWNSHIP RESIDENT*

**AGE CATEGORY AWARDS TO THE FIRST THREE
MALE AND FEMALE WINNERS.**

12 & under	35 - 39	55 - 59
13 - 19	40 - 44	60 - 64
20 - 29	45 - 49	65 - 69
30 - 34	50 - 54	70 - 79
		80 + & over

No duplicate awards

- SPONSORS -

BCB COMMUNITY BANK
THE CLUB AT WOODBRIDGE
WILENTZ, GOLDMAN & SPITZER
BAYSHORE RECYCLING
RARITAN BAY MEDICAL CENTER
SENATOR JOSEPH F. VITALE
JAMES P. NOLAN & ASSOC., LLC

TO REGISTER:

Mail this form and a check payable to "Mayor's Council on Physical Fitness & Sports" (M.C.P.F. & S.)
 To: Race Director, Runners High, 454 Main St., Metuchen NJ 08840



FEES: 10K & 5K \$20.00* pre-registered (postmark by 9/1/19 *\$2.00 off for USATF-NJ members (must provide number on entry). \$25.00 on day of race for all runners.

Register Online at:

Register.compuscore.com/woodbridgecrossroads

ENTRY FORM

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone # () _____
 Date of Birth _____ Age on 9/1/19 _____
 USATF-NJ# _____
 Male ___ Female ___ T-Shirt Size S ___ M ___ L ___ XL ___
 Race Entered: 10K ___ 5K ___ Lollipop ___

In consideration of the acceptance of my entry, I, on behalf of myself, my heirs, executors, administrators and assignees, hereby release myself and discharge The Woodbridge Council on Physical Fitness & Sports, The Club at Woodbridge, the Crossroads of New Jersey Race Committee, the race sponsors, the Township of Woodbridge and its employees, officials and volunteers, USA Track & Field and all other sponsors or beneficiaries and their representatives, successors and assignees for all claims for damages and causes of action arising from or out of my participation in the "Woodbridge-Crossroads of New Jersey" Races. I attest that I am physically fit and that my condition has been verified by a physician. I am aware that the medical support for this event will be volunteer medical personnel who will be prepared to administer First Aid assistance only. I hereby grant permission to The Woodbridge Council on Physical Fitness & Sports and any other sponsors of this event to use all information submitted in this application and any record of this race containing my likeness, as well as race results including my name and competition time, for any purpose whatsoever, including but not limited to pre-race publicity. I hereby certify that I have read all the terms and conditions of this release and intend to be legally bound thereby.

Signature _____
 (Parent's signature if under age 18)

AMOUNT ENCLOSED \$ _____

THIS ENTRY FORM MAY BE DUPLICATED.