

REGISTER NOW !

Just fill in this form **UFO Salon & SPA** or **Franklin Township Food Bank**
 and mail it with your **798 Easton Avenue** **PO Box 333**
 registration fee to: **Somerset, NJ 08873** **Somerset, NJ 08875-0333**

or bring it with your registration fee and pledges and register 30 minutes prior to your event at the **Community/Senior Center, 475 DeMott Lane (near Amwell Rd.), Somerset, NJ.** Make checks payable to "Franklin Township Food Bank. Each participant must fill out and sign a separate registration form.

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____

Group/Team Name _____

Shirt size M_ L_XL_ My goal is \$_____ **Use your employer's matching gifts program**

Charge my Amex Visa Master Charge Reg Fee \$_____

Card Number _____ Add'l Donation ** \$_____

Exp. Date ____/____ Sponsor Total \$_____

Auth. Signature _____ Total \$_____

****The Feinstein Foundation will provide a match for donations above the registration fee**

- | | | |
|----------|---|-------------------------------------|
| CHOOSE | ThorLabs 62-Mile Metric Century \$45 | 6 Towns of Franklin (40 Miles) \$40 |
| AN EVENT | 25-Mile Bike Tour \$35 | 10-Mile Bike Tour \$35 |
| | 1-5 Mile Ride or Walk \$30 | D & R Canal Towpath Ride \$ 35 |
| | Scenic-up to 5 mile-D&R Canal Towpath Walk \$30 | |
| | Kids 12 and under –all events \$15 | |

WAIVER OF RESPONSIBILITY In signing this release I acknowledge that I understand the intent thereof, and I hereby agree and will absolve and hold harmless the Tour de Franklin and any other parties connected with this event in any way, singly or collectively, from or against any blame and liability for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the Tour de Franklin or any activities associated herewith. I also agree to wear helmet and appropriate safety equipment, consent to and permit emergency treatment in the event of injury or illness.

Signature _____ Signature of Parent / Guardian if under 18 _____

Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney General of the State of New Jersey by calling (973) 504-6215. Registration with the Attorney General does not imply endorsement

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