

SMRF
PO Box 715
Clementon, NJ 08021

Making Strides

5 K Run & 1 Mile Health Walk



Sponsored by the

Susan Marie Rupp Foundation

**Sisters, Mothers, Relatives and Friends
Against Ovarian Cancer**

Saturday April 28th, 2012

**Overbrook High School
1200 Turnerville Rd.
Pine Hill, NJ 08021**

The Event

The Susan Marie Rupp Foundation invites you to participate in our 5K run/1 mile Health walk to promote Ovarian Cancer awareness and education programs on Saturday, April 28th. T-shirts given to all pre-registered participants. Deadline for pre-registration is April 14th. A portion of the course is cross country terrain.

Registration Fees

Post-marked by April, 14th

5 K \$ 20.00

1 mile Health walk \$ 15.00

After April 14th and Race day

5 K \$ 25.00

1 mile Health walk \$ 20.00

Schedule

7:30 am: Registration/t-shirt pick-up

9:00am : 5 K & Walk Begins

Awards

5 K Awards will be presented immediately after the race.

Top Overall Male & Female
Top 3 Males & Females
in the following age groups:

12-15	16-19
20-29	30-39 40-49
50-59	60+

Susan Marie Rupp Foundation

“Sisters, Mothers, Relatives & Friends”
against Ovarian Cancer



The Susan Marie Rupp Foundation is a non-profit organization founded in loving memory of Susan Marie Rupp who courageously battled Ovarian Cancer for eight years. Losing her fight in July of 2010, we are dedicated to promoting awareness by spreading knowledge of Ovarian Cancer with the hope to one day eradicate this “silent killer.”



For additional race information:
www.LMSports.com

or contact

SMRFinfo@gmail.com

Ovarian Cancer FACTS

- Ovarian Cancer is one of the five leading causes of cancer death in American women.
- Each year, over 22,000 women are diagnosed and about 17,000 women die of ovarian cancer.
- A women’s lifetime risk of developing ovarian cancer is 1 in 72.
- Chances of survival increase if the cancer is found early.
- A pap test does NOT detect ovarian cancer, it test for cervical cancer.

UNTIL THERE'S A TEST, AWARENESS IS BEST!

What Should I look for?

Take action and see your doctor, if the following symptoms are unusual for you and occur almost daily for more than a few weeks:

- Bloating
- Pelvic or abdominal pain
- Difficulty eating or feeling full quickly
- Urinary symptoms (urgency or frequency)
- Additional symptoms may include fatigue, indigestion, back pain, constipation and menstrual irregularities.

Registration Form

Name: _____

Age: _____ Sex: M / F

Address: _____

City: _____

State, _____ Zip: _____

Phone: _____ - _____ - _____

Email: _____

Amount: \$ _____

t-shirt size: M L XL
while supplies last (Circle One)

Please indicate which event you plan to participate in.

_____ 5 K
_____ 1 mile Health
_____ I am unable to attend but please accept my donation of \$ _____ in support of your efforts.

All Proceeds benefit SMRF.

Please make checks payable to :
Susan Marie Rupp Foundation
PO Box 715
Clementon, NJ 08021

Waiver. I hereby acknowledge that I am physically able to participate in this Susan Marie Rupp Foundation event. I agree that all decisions of the race officials are final. I waive any and all liabilities arising out of my participation in this event. By submitting this application, I acknowledge the release statement above.

Signature of participant
(an adult or parent MUST sign for anyone under the age of 18)