

# 2<sup>nd</sup> Annual Brian Ballard Memorial Duathlon

Brian Patrick Ballard, age 50 years, succumbed to cancer in the Spring of 2010 after a courageous battle with the disease. Born in Mount Holly, he graduated from Burlington High School in 1977, Ursinus College in 1981, where he was a member of the Varsity Swimming Team, and Widener Law School in 1985.

A resident of Mullica Hill since 1998, Brian served as President of the Brookside Recreation & Swim Club Board of Directors, as a volunteer coach for Harrison Township Soccer Club, Harrison Township Youth Basketball, and Harrison Township Little League. Brian was also an avid runner, golfer, and past member of Atlantic City Country Club and Running Deer Golf Club. Brian was passionate about anything sports-related, and he particularly loved to watch his daughters compete in athletic events, especially swimming and soccer. He was a regular at the annual Brookside Swim Club's Leon Gajecki Masters Swim Meet.

Proceeds to benefit the Ballard Family and  
the Brian Ballard Memorial Scholarship Fund.



## Brookside Swim Club

**500 Meter Pool Swim** (timed between 6:00 am and 8:30 am)

**5K Run** to start at 9:00 am

**Saturday, June 4, 2011**

Sponsor



Greater Philadelphia Aquatic Club – Sewell, NJ 08080

**Age Groups**  
13-16, 17-19, 20-29  
30-39, 40-49, 50-59  
60-69, 70+

**Awards**  
Male and female in each age group and team awards



**Pool will open 6:00 am. All swimmers must finish the swim by 8:30 am; please do not wait until the last minute to do the swim. Participants can stay at the pool for free the entire day. Their family members can stay for \$5.00 / person.**



### **Application Fees**

**\$40.00/Individual - Non-refundable**  
**\$25.00/Team Member - Non-refundable**  
**(Includes T-shirts)**

**Race packet pick up day: Day of race.**  
**Can register on race morning**



**11 Ruth H. Mancuso Lane**  
**Glassboro, NJ 08028**  
**856-589-9632**  
**Web site directions under general info tab.**

# **2011 Brian Ballard Memorial Duathlon**

**Saturday, June 4, 2011**

Make check payable to: Brookside Swim Club. Please return waiver and check to Brookside Swim Club  
PO. Box 412, Pitman, NJ 08071

Online applications: [www.brooksidedolphins.com](http://www.brooksidedolphins.com)  
[www.lmsports.com](http://www.lmsports.com)

### **Application**

\_\_\_\_ Individual      \_\_\_\_ Team      Swim Member: \_\_\_\_\_  
Run Member: \_\_\_\_\_

Name: \_\_\_\_\_

Age (on race day) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E mail Address: \_\_\_\_\_

Medical Problems / Allergies: \_\_\_\_\_

Contact in case of Emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Paid: \_\_\_\_\_ Race #: \_\_\_\_\_

### **MUST SIGN WAIVER**

As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of any injuries, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program.

I agree to waive and relinquish all claims I may have as a result of participating in the event against Brookside Swim Club, Boro of Glassboro, Boro of Pitman, Gloucester County, NJ, and its officers, agents, servants, and employees.

I do hereby fully release and discharge same as above and its officers, agents, servants, and employees from any claims from injuries, damage or loss which I may accrue to me arising out of, connected with, or in any way associated with activities of the event.

I further agree to indemnify and hold harmless and defend same as above and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me arising out of, connected with, or in any way associated with the activities of the event.

I have read and fully understand the above Event Details, Waiver and Release of all claims and permission to Secure Treatment.

Name: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_ Parent/Guardian: (if under 18) \_\_\_\_\_

Date: \_\_\_\_\_