



The Warrior

Saturday June 21, 2025

Hillside Park
146 Lake Iliff Road
Andover, NJ 07821

friend2friendscwf.com/warrior



Join us for a new fitness event to benefit Friend 2 Friend Free Digital Mammography Program/Sussex County Women's Forum, a 501C (3) non-profit organization. 100% of event fees provide free digital mammographies.

Event Description:

Located at Hillside Park in Andover, NJ, teams of 2 or 3 people will complete a 5K course with 4 BodyWeight "Hero" exercise stations; 1 every $\frac{3}{4}$ mile. No solo competitors. ***This is not a timed event.***

Fees:

Partner Challenge – Teams of 2

\$60 total (\$30 each) through 6/10

\$80 total (\$40 each) through day of event

Team Challenge – Teams of 3

\$90 total (\$30 each) through 6/10

\$120 total (\$40 each) through day of event

Participants must be 15+ years old for this event. No solo competitors.

Schedule:

8:30am Event Day Registration and Check-in

9:30am Start Time

Awards:

- Hobo bags & finisher medals

Featuring:

- Pizza, fresh fruit, snacks, Newater station

Registration:

Fees are payable by check to "F2F." Complete team registration form and mail with check to 37 Cambridge Road, Lafayette, NJ 07848. F2F has a strict *no refund policy*, in effect since 2000.

The Warrior | Sat. June 21 2025 | Mail-in Team Registration | friend2friendscwf.com/warrior

Participants must be 15+ years old for this event. No solo competitors.

Make Checks Payable to "F2F", and mail to 37 Cambridge Road, Lafayette, NJ 07848. F2F has a strict **no refund** policy, in effect since 2000.

Waiver:

In consideration of your accepting this entry, I the undersigned, intending to be legally sound, hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the sponsoring organization, SCWF Friend2Friend, Hillside Park, Andover Township, Warrior's Path CrossFit, their representatives, successors, agents, servants or employees, and assignees for any and all injuries suffered by me in said event. I hereby assume all rights in connection with participation in said event and do not expect any aid, assistance, direction, or any other duty or obligation from the officials or agents.

Team Name: _____

Team Member #1 Full Name: _____

BIB # _____

Age: _____

DOB: _____

Email: _____

Phone: _____

I have read and agree to the waiver above.

Signature: _____

Date: _____

(Parent/Guardian if athlete is under 18.)

Team Member #2 Full Name: _____

BIB # _____

Age: _____

DOB: _____

Email: _____

Phone: _____

I have read and agree to the waiver above.

Signature: _____

Date: _____

(Parent/Guardian if athlete is under 18.)

(COMPLETE ONLY IF PARTICIPATING IN TEAM CHALLENGE)

Team Member #3 Full Name: _____

BIB # _____

Age: _____

DOB: _____

Email: _____

Phone: _____

I have read and agree to the waiver above.

Signature: _____

Date: _____

(Parent/Guardian if athlete is under 18.)