

# EVENT PARTICIPANT WAIVER

The following release **MUST BE SIGNED** by each runner/walker/volunteer or if the runner/walker/volunteer is under 18 years of age, by the parent or legal guardian of the runner/walker/volunteer.

In consideration of your accepting this entry to run/walk/volunteer in the "run for Victims' Rights" ("the event"), I, the undersigned, intending to be legally bound, hereby, for myself my successors, heirs, executors, administrators, agents and assigns, do hereby waive and release any and all rights and claims whatsoever for damages in any amount I may or might have against the City or County of Los Angeles, their officers, directors, employees, agents, representatives, shareholders, partners, or any of the sponsors of officials of the event, their representatives, successors, agents and assigns, for any and all injuries or illness which may be suffered by me in the event or as a result of my participation as a runner/walker/volunteer in the event. I hereby represent, attest and verify that I am physically fit and have sufficiently trained for the completion of the event's run/walk.

I further hereby agree to permit the free use of my name and picture in any broadcasting, telecast, video and media or other public relations or coverage of the event, made or occurring prior to, during or after the event. **Vehicle warning!** (Watch for vehicles on the course at all times). **Heat Warning!** Hot and humid conditions may exist on the event race day. Please drink plenty of liquids. No radio headsets allowed!

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

*If participant is under 18 years of age, Parent/Legal Guardian's signature is required:*

\_\_\_\_\_  
PRINT NAME OF PARENT/LEGAL GUARDIAN

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**If not associated with an Agency, please make checks payable directly to the agency of your choice and mail to:**

Los Angeles City Attorney's Office  
Victim Assistance Program – 5K  
201 N. Los Angeles Street, Mall Space 301B  
Los Angeles, CA 90012

# DONATION WORKSHEET

*Photocopy for additional donations.*

\_\_\_\_\_  
Participant's Name

\_\_\_\_\_  
Name of Agency/Organization

\_\_\_\_\_  
Home Address

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

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Email Address

Donor's Name	Amount Rec'd
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____

**Total Donations:** \$ \_\_\_\_\_

## 5th Annual CITY OF LOS ANGELES



SPONSORED BY

**Rocky Delgadillo**  
CITY ATTORNEY

Sunday, **APRIL 5, 2009**

**POINT FERMIN PARK**  
807 Paseo Del Mar • San Pedro, CA 90731  
RACE TIME: 8:30 a.m.

PRESENTING SPONSORS



GENERAL INFORMATION  
[www.larun4victimsrights.com](http://www.larun4victimsrights.com)

# 5K for victims' rights

## EVENT INFORMATION

## EVENT SCHEDULE

**What is the "5K RUN/WALK for Victims' Rights?"** • It is a 5K timed run and community-based organization walk sponsored by the Los Angeles City Attorney's Office and our presenting sponsor, Verizon Wireless to help community-based organizations to raise funds. 100% of the proceeds will benefit City and County of Los Angeles community-based organizations who provide services to victims of crime in the areas of: domestic violence, sexual assault, gun violence and hate crimes.

**RACE DATE:** Sunday, April 5, 2009

**Location** • Point Fermin Park – 807 Paseo Del Mar – San Pedro, CA 90731.

**Race Start Time • 8:30 a.m.** – 5K Run/Walk Participants should arrive no later than by 7:30 a.m. to avoid lines on race day.

### REGISTRATION FEES •

\$20.00 Adult Participant

\$10.00 Students (18 and under), Seniors (65+)

• Add \$5.00 to fee after March 28, 2009

• \$3.00 discount given to participants belonging to a running club/group.

**Course** • This is a 5K course with a slight incline and a breathtaking view of the pacific coastline looking out toward Catalina Island. Water will be available near the 1.5 mile mark. Baby strollers are welcome. No Inline skates, bicycles or pets.

**Awards** • Awards will be presented to the top 3 Male and Female finishers. A special medal will be given to the top Male/Female finishers in each age division. All participants will receive a T-Shirt, a finishers medal and goodie bag after completing the race.

**Parking** • Free parking is available in an adjacent lot and along several nearby streets across from the park. Come early!

**Post-Race** • Post Race refreshments will be available to participants at the finish line. A resource community fair will be available for you to obtain valuable information on various programs.

**Raffle Prizes** • Each participant will receive a raffle ticket for a chance to win one of several great prizes.

- 7:00-8:00 am: Packet pickup/Late Registration
- 8:00 am: Opening Ceremony
- 8:25 am: Warm-up
- 8:30 am: Start (Runners First/Walkers-Immediately following)
- 9:30 am: Medals Awarded to Top Runners
- 9:45 am: Raffle Prizes / Entertainment



For more Event and Registration Information, Volunteer Opportunities and list of Participating Agencies, please visit our website:

[www.larun4victimsrights.com](http://www.larun4victimsrights.com)

To contact us, go to our website and e-mail us.

## PRESENTING SPONSORS



## MAJOR SPONSORS



## ASSOCIATE SPONSORS



## ENTRY FORM

Participant's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

## RUNNER INFORMATION

Age on Race Day: \_\_\_\_\_ Sex:  M  F

T-Shirt Size:  S  M  L  XL  XXL

## DIVISION

5K Run  5K Community Walk

## AGE DIVISION

10 & Under  11-14  15-19  20-24  25-29  
 30-34  35-39  40-44  45-49  50-54  
 55-59  60-64  65-70  71-79  80+

## REGISTRATION FEES *Rain or Shine • No Refunds • Entries Nontransferable*

\_\_\_\_\_  \$ 20 Adults (Runners/Walkers)  
 \_\_\_\_\_  \$ 10 Kids (18 and Under) / Seniors (55+)  
 Add \$5 after March 28 and on Race Day  
 \$3.00 Discount to Running Club Members  
 \$ \_\_\_\_\_ TOTAL

Donation Only to: \_\_\_\_\_

Print Name of Agency Designating Fees to  
 (For list of participating agencies to choose from go to [www.larun4victimsrights.com](http://www.larun4victimsrights.com))

## MAIL IN REGISTRATION

Please make **checks payable directly to the Agency** of your choice and mail along with the Entry/Signed Participant Waiver form to:

OR REGISTER ON-LINE AT [WWW.ACTIVE.COM](http://WWW.ACTIVE.COM)