



Calabasas Classic Run

**5K / 10K & 1 Mile Fun Run
Sunday, November 6, 2016
Participant Registration Form**

PARTICIPANT INFORMATION:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

Cell: _____ Cell Carrier: _____

(Race results will be sent to cell number provided.)

BIRTHDATE: _____ (mm/dd/year)

GENDER:

_____ MALE

_____ FEMALE

RACE: indicate the race you are participating in

_____ 5 K \$40

_____ 10 K \$40

_____ 1 Mile Fun Run \$20

SHIRT SIZE: indicate your shirt size

_____ Small

_____ Medium

_____ Large

_____ X-Large

_____ Other

Payment Type:

_____ Cash

_____ Check Number - Enclosed is my check payable to the **Calabasas Classic Run**

_____ Credit Card - Please charge my _____ Visa _____ MasterCard _____ Discover

Name of Card Holder: _____ Expiration date: _____

Credit card number: _____ CCID#: _____

Total Amount: _____

Authorization Signature: _____ **Today's date:** _____

PARTICIPANT RELEASE AND INDEMNIFICATION AGREEMENT
Calabasas Classic Run 5K / 10K / 1 Mile ("Event")

I (hereinafter all references to "I" or "my" include my participating minor children for whom I am signing this release) acknowledge and am aware that running a road running race is a potentially hazardous activity, which could cause accidents, injury, illness or death to myself and/or any minor children for whom I am responsible. I should not enter and run unless medically able and properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this Event, including the right of the official to deny or suspend my participation for any reason whatsoever. I hereby certify I am in good health, and I have trained to run the distance of the race that I am entering (10k/10 mile). I am not aware of any reason, medical or otherwise, why I should not participate in the Event. I hereby accept and knowingly, voluntarily and freely assume any and all risks, whether known or unknown to me, of participating in the Event, including, but not limited to, falls, contacts with other participants, the effects of the weather, including high heat and/or humidity, conditions of the trails/roads, all such risks being known and appreciated by me.

In consideration of permitting me to participate in the Event I agree (on behalf of myself, my heirs, executors, administrators, and assigns) to release, discharge, waive, and relinquish the Agoura Hills/Calabasas Community Center Joint Powers Authority, Community Center Alliance and City of Calabasas (and their officers, agents, employees, and volunteers) (collectively referred to as the "CC Race Agencies" from any and all liabilities, claims, or actions for personal injury, property damage, or wrongful death which arise out of or relate to the event, whether or not the liability, claim, or action arises out of negligence or carelessness on the part of the CC Race Agencies. I further agree (on behalf of myself, my heirs, executors, administrators, and assigns) to indemnify, defend, and hold harmless the CC Race Agencies from any and all liabilities, claims or actions for personal injury, property damage, or wrongful death which arise out of or relate to my participation in the Event, whether or not the liability, claim, or actions arises out of negligence or carelessness on the part of the CC Race Agencies.

I give permission to the CC Race Agencies to use photographic reproductions of the participants named on this form for marketing purposes.

I understand that by signing this document I am, among other things, giving up important legal rights and that I am giving up the right to sue the CC Race Agencies. I acknowledge and certify that I had sufficient opportunity to read this entire document, that I understand its content and that I execute it knowingly, freely, intelligently and without duress of any kind, and that I agree to be bound by its terms.

Participant Name: _____

Signature: _____ Date: _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF EVENT)

This is to certify that I am the parent/guardian with legal responsibility for this minor participant, and I do consent and agree to his/her participation, and agree to and authorize all provisions and releases provided above, on behalf of my child. For myself, my heirs, assigns, personal representatives, executors, administrators, and next of kin, I release and agree to indemnify and hold harmless the CC Race Agencies from any and all liabilities incident to my minor child's involvement in this Event as provided above, whether arising from the active negligence of the CC Race Agencies or otherwise, to the fullest extent permitted by law.

Parent/Guardian Name: _____ Phone No.: _____

Signature: _____ Minor Name: _____

Date: _____

Emergency Contacts other than Parent/Guardian:

Name/Relation to Minor: _____ Phone No.: _____

Name/Relation to Minor: _____ Phone No.: _____