



# 10K & 5K Fun Run/Walk

Saturday, February 11, 2017 at 9:00 am

**Campbell Park**  
(corner of Campbell Ave. & Gilman Ave.)

**\$42 for Adults; \$22 for ages 19 and under**

## PARTICIPANT INFORMATION

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

RESIDENTIAL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PRIMARY PHONE (\_\_\_\_) \_\_\_\_\_ ALTERNATE PHONE (\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

BIRTHDATE (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_ GENDER: M F **PARTICIPATING IN: 5K 10K**

T-SHIRT SIZE: Choose MEN'S or WOMEN'S and Small (S) Medium (M) Large (L) XL (XL) XXL (XXL)  
OR Youth Medium (M)

## ADDITIONAL FAMILY PARTICIPANTS UNDER 18

*(Each Adult 18+ must fill out and sign a separate registration form)*

NAME \_\_\_\_\_

BIRTHDATE (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_

GENDER: M F **PARTICIPATING IN: 5K 10K**

T-SHIRT SIZE: MEN or WOMEN and S M L XL XXL  
OR YOUTH M

NAME \_\_\_\_\_

BIRTHDATE (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_

GENDER: M F **PARTICIPATING IN: 5K 10K**

T-SHIRT SIZE: MEN or WOMEN and S M L XL XXL  
OR YOUTH M

## REGISTRATION FEES & PAYMENT

**\$42 for Adults; \$22 for ages 19 and under**

PARTICIPANT 1: \$ \_\_\_\_\_ +

PARTICIPANT 2: \$ \_\_\_\_\_ + = TOTAL:

PARTICIPANT 3: \$ \_\_\_\_\_ + \$ \_\_\_\_\_

CREDIT CARD   

NAME ON CREDIT CARD \_\_\_\_\_

CREDIT CARD NUMBER (all 16-digits) \_\_\_\_\_ / \_\_\_\_\_  
EXP DATE (MM/YY)

CHECK (payable to "City of Campbell")

CASH (walk-in only)

## LIABILITY RELEASE & SIGNATURE

**Photo/Video Release:** I agree to allow the use of my photograph or my child's photograph for program publicity. If you would like to opt-out of the photo release please go to [www.cityofcampbell.com/recreation](http://www.cityofcampbell.com/recreation) and fill out the online form. **Medical Release:** Pursuant to provisions of sec. 6910 et seq of the California Family Code, and other applicable laws, I hereby authorize the City of Campbell Recreation & Community Services Department to procure, and consent to, medical, hospital or dental care for myself or my child in the event of injury as a result of participation in this program. **Waiver & Release of Liability:** In consideration of my participation, I hereby release, discharge and covenant not-to sue the City of Campbell & Campbell Redevelopment Agency, their officers, employees and volunteers, from any and all present and future claims, demands, actions, or causes of action resulting from any accidents, injuries, deaths, or loss of and/or damage to my/our person(s) or property arising out of or connected with my/our participation in the above activity (ies) (except for claims legally caused by the sole negligence or willful misconduct of the City or others listed above). I hereby voluntarily waive any and all claims resulting from ordinary negligence, present and future, that may be made by me, my family, estate, heirs, or assigns. Further, I am aware that this activity may involve certain risks or possible dangers, including death, & that equipment provided for my protection may be inadequate to prevent serious injury. I am voluntarily participating in this activity with knowledge of the danger involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death. I further agree to indemnify and hold harmless the City of Campbell & others listed above for any & all claims arising as a result of my engaging in this activity. I understand that this waiver will continue in full legal force and effect. I further agree the venue for any legal proceedings shall be in California. I affirm I am of legal age and am freely signing this document. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which shall be available to me against the City of Campbell or any of the parties listed above. The City is not responsible for lost or stolen articles. **Refunds,** less a \$10.00 admin. fee, will be given to registered participants who cancel up to 5 business days in advance of a class start date. Cancellations less than 5 business days notice will not receive a refund.

X \_\_\_\_\_ Date \_\_\_\_\_

Signature (Read before signing)  Participant  Parent  Legal Guardian



RECREATION & COMMUNITY SERVICES DEPARTMENT  
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