Official Entry Form

Susan G. Komen San Diego Race for the Cure 5K & 1 Mile Walk/Run
8 a.m. Sunday, November 5, 2017

Note to Team Captains: This entry form can be duplicated. Use the space "Join Our Team!" to fill in your information prior to distributing entry forms. **Be sure that your team members know the team name**, the name of the person they need to turn their forms in to and the name and contact info for their point person should they have questions. Note: Any entry forms received without a team name listed will not be credited to your team. Save time — Sign up online at KomenSanDiego.org/race

1 Participation Type

☐ I'm registering as an Individual OR
☐ I would like to join a team OR
☐ I would like to start a team

Team Name: _____

Team Captain: _____

Mail completed form(s) to:
Komen Race for the Cure®, 6116 Innovation Way, Carlsbad, CA 92009

Team Members:

Turn in this completed form along with payment to the team captain listed in the box on the left. Team registration closes on Wed. 10/27

Team Captains:

Mail completed form(s) w/ payment to: Komen San Diego Race for the Cure®, 6116 Innovation Way, Carlsbad, CA 92009

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First Name:_____ Last Name:_____

M ☐ F ☐ Age on 11/5/17:_____ DOB: (MM/DD/YY):_____/_____/_____

Mailing Address_____ Phone_____-_____-_____

City:_____ State:_____ Zip Code:_____

Email address:_____

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Registration Type *All entries include a T-shirt.*	April 1 — June 1	June 2 — Sept. 5	Sept. 6 — Nov. 4
☐ Save a Life Package–$285 Add a $250 tax-deductible donation to your $35 registration fee, which could provide a low-income breast cancer patient with support! Fee includes a commemorative Race for the Cure T-shirt. Another added value is COMPLIMENTARY PARKING and SHUTTLE service to and from the Race site compliments of SuperShuttle and Manpower.			
☐ Adult	$35	$40	$45
☐ Military	$30	$35	$40
☐ Youth (18 and under)	$20	$25	$30
☐ Sleep In for the Cure (Virtual)	$40	$45	$50-Must be registered by 10/27

4 Donation — Please consider making a tax deductible donation in addition to your non-tax deductible registration fee:

☐ **You're Not Alone $1,250** Offering a month's worth of intensive support groups to 10 women

☐ **Never Go Hungry $250** A week's worth of meals for a woman and her family in treatment

☐ **Change the Odds $125** One life-saving mammogram

☐ **I Honor a Loved One $36** Honoring the life of a loved one

☐ **Additional Gift: $**_____

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☐ Pups for the Cure: $10.00 You can sign up your favorite four-legged friend for the Race and receive a doggie bandana.

☐ Timing Chip: $10.00 Receive an official time and be eligible for age group awards for the 5K only.

☐ MTS Day Pass Bus & Trolley: $5.50 The MTS logo will be printed on your bib, which will act as your ticket to ride all Race day.

☐ Get your T-shirt and bib mailed to you: $20.00 Must be registered by 10/27

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A. What is your T-shirt size?

Adult Race T-shirt: SM ☐ MED ☐ LG ☐ XL ☐ XXL ☐
Youth Race T-shirt: 2/4 ☐ 6/8 ☐ 10/12 ☐ 14/16 ☐
Donate back to Komen ☐

B. For untimed walkers would you like to participate in the 5K or the 1 mile?

5k ☐ 1 mile ☐

C. Please select one of the following:
I am a breast cancer survivor ☐ I am fighting breast cancer ☐
My family member is a survivor/fighter ☐ None of the above ☐

D. Fundraisers are eligible for fundraising prizes. Would you like to receive your fundraising prizes? (If not, they will be donated back to Komen San Diego.)?

Yes ☐ No ☐

E. If you are walking or crewing for the 3-Day Walk please provide your Participant Number _____

7 Payment

Total: $_____
Make checks payable to: *Komen San Diego*
Charge credit card:

Credit Card: VISA MasterCard Discover AmEx
Card Number:
| __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ | __ |

Expiration Date: | __ | __ | / | __ | __ | CVS Code: _____

_____
Cardholder's signature (authorizing charge to credit card)
Date: _____

8 Please read and sign the release waiver on the back.

? Questions: 760.692.2900 or race@sdkomen.org

RACE FOR THE CURE RELEASE AND WAIVER

I AGREE ALL REPRESENTATIONS MADE AND RELEASES, WAIVERS, COVENANTS AND CONSENTS GIVEN BY ME HERE ARE GIVEN ON BEHALF OF ME AND ALL MY MINOR CHILDREN OR PERSONS OVER WHOM I HAVE GUARDIANSHIP TRAINING FOR OR PARTICIPATING IN EVENT. MINORS UNDER 18 MUST BE ACCOMPANIED BY A PARENT/GUARDIAN WHO IS ALSO A REGISTERED PARTICIPANT.

In consideration of participation in the Race for the Cure, I, for myself and my next of kin, heirs, administrators and executors, waive and release The Susan G. Komen Breast Cancer Foundation, Inc., its affiliates, including the affiliate conducting Event ("Affiliate"), and their respective directors, employees, volunteers, agents, assigns, vendors, contractors, governments, licensees and successors (collectively, "Releasees"), from any and all claims, liabilities, actions, demands, expenses and attorneys' fees arising out of my training for and participation in Event and my related fundraising activities (collectively, "Event").

I understand Event may involve physical activity, contact with other persons or other potential risk of bodily injury or damage to property. I voluntarily assume full and complete responsibility for and the risk of any injury, including death, accident or lost/stolen property.

I am medically and physically able to participate in Event and take full responsibility for consulting a physician. I consent to emergency medical care and transportation if injured, as medical professionals deem appropriate. This Release extends to any liability arising out of or in any way connected with the medical care/transportation provided, including negligent emergency rescue operations.

I will obey all laws, rules and safety procedures relating to Event. I will abide by any decision of an event official related to my ability to safely compete in Event and exhibit appropriate behavior at all times. Event officials may dismiss me without refund if my behavior endangers the safety of or negatively affects Event or any person or property.

I give Releasees the irrevocable, perpetual and worldwide right to use, copy, publicly perform or display, distribute, modify, translate, and create derivative works of, for any purpose and without compensation (i) any personal statements, photos, videos, audio and other recordings of me made during Event and any original material created by me in connection with Event; and (ii) the results of my participation in Event. Without limiting the foregoing, I agree all personal information provided by me for Event may be used according to the privacy policy referenced below.

This Release will be construed under the laws of the state where Event is held. If any provision of this Release is deemed unenforceable by law, Affiliate may modify such provision to the extent needed to be deemed enforceable and all other provisions will remain in full force and effect.

I understand all donations made in connection with Event are non-refundable and non-transferable and the registration fee is non-refundable, non-transferable and not tax deductible.

I certify I am at least 18 years old. I understand I have given up substantial rights by accepting this Release and have signed it freely and voluntarily without any inducement, assurance or guarantee. I intend my acceptance to be a complete and unconditional release of liability to the greatest extent allowed by law.

If Event is held in California, the following applies:

This Release extends to claims and facts unknown and unsuspected to exist at the time of executing this Release. All rights under Section 1542 of the California Civil Code are hereby expressly waived with respect to any of the claims, injuries, or damages described in this Release. Section 1542 of the California Civil Code reads as follows:

A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM MUST HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR.

Printed Name of Participant: _____

Participant's Signature: _____

Parent's or Guardian's Signature: _____

(If participant is under age 18)

Date: _____