

3rd Annual Band on the Run 5K
Saturday, February 16, 2019

Heritage Park
 5001 Via De Mansion, La Verne, CA 91750

Pre-register by February 13 \$20.00
 Registration after February 13 \$35.00
 BUSD Staff & Students Pre-register \$10.00
 BUSD Staff & Students after Feb 13 \$20.00



Checks to LVBBA & drop off at Bonita High School
 Pay by Paypal/Credit Card at : www.lvbba.org
Rain or Shine! NO REFUNDS!

Registration 7:00am 5K Start 7:30am Awards 9:00am

Awards to top 3 Male & top 3 Female by age groups Questions? Email volunteers@lvbba.org

Name: _____
 Phone #: _____
 Address: _____
 Age: _____ Date of Birth: _____ Sex(circle one) **M F**
 Emergency Contact Name & Phone # _____

In consideration of your acceptance of this entry, I hereby for myself, my heirs, Executors and Administrators waive and release all rights for claims and damages I might have against the Race Director, Bonita HS, The LVBBA, City of La Verne, Sponsors and all related parties for any and all injury or damage resulting from participation in the Band on the Run 5K event. I am in good health and proper physical condition to participate in this event. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in this event. I hereby pre-authorize the event organizers and their representatives to arrange for emergency medical treatment and agree that I will be responsible for all costs associated with any such medical care and/or transport arranged on my behalf.

PARTICIPANTS SIGNATURE _____ **DATE:** _____
PRINTED NAME OF PARTICIPANT _____

PARENTAL WAIVER ON BEHALF OF MINOR CHILD-

As the parent and/or Legal Guardian to the minor identified above, I hereby accept and agree to all terms and conditions of this agreement in connection with the minor's participation in this event. If, despite this agreement, I, or anyone on the minor's behalf, makes a claim for liability against any of the release parties, I will indemnify, defend and hold harmless each of the released parties from any such liabilities which may be incurred as the result of such claim.

PARENT/GUARDIAN SIGNATURE _____
 (REQUIRED IF PARTICIPANT IS UNDER THE AGE OF 18)

PRINTED PARENT/GUARDIAN NAME _____
DATE _____