16TH ANNUAL KID'S FUN RUN

Monday, July 4th 2011

Presented by the Palisades-Will Rogers Ridge Runners & The Palisades Optimist Club

Corporate Sponsor: WILLIAM E. SIMON & SONS

Title Sponsor: Saint John's Health Center — Breakthrough Medicine. Inspired Healing.™

Entry Fee:	Pre-registration $25 Day of race registration $30
PRE-REGISTRATION DEADLINE:	Saturday June 25th, 2011
Online Registration Deadline:	Midnight PST Wednesday June 29th , 2011
Make Check Payable to:	Palisades-Will Rogers 5K/10K Run
Mail to:	Brian W. Shea PO Box 601, Pacific Palisades, CA 90272
Pre-Registration Pick Up:	July 2nd & 3rd from 10:30am - 4pm Bentons The Sport Shop 1038 Swarthmore Ave., Pacific Palisades, CA 90272, (310) 459-8451
Day of Race Registration:	July 4th from 6:30 - 8a.m. at Palisades Recreation Center 851 Alma Real Drive, Pacific Palisades, CA 90272
Start:	9:15 a.m. SHARP at Palisades Recreation Center
Website:	www.palisades10k.com
E-Mail Address:	palisades10k@Verizon.net

ENTRY FORM (Kid's Fun Run)

Name _____ (Last) _____ (First)

Sex: M F **Age** ____ **Birthdate** ____ – ____ – ____ **T-shirt choice (Youth Sizes):** S M L

Address _____ **Apt. No.** _____

City _____ **State** ____ **Zip** _____

Waiver:

In consideration of you accepting this entry and for other valuable consideration receipt of which you are hereby acknowledged, I the undersign, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release all rights and claims for damages I have against the Athletic Congress, The Long Distance Running Committee, the Officials, the Pacific/Palisades Optimist Club, William E. Simon & Sons, Bentons The Sport Shop, The Palisades-Will Rogers 5 & 10 K and Kids Run Volunteers, The Palisades-Will Rogers Ridgerunners, Saint John's Health Center and Saint John's Health Center Foundation and any and all sponsors, or The City of Los Angeles, their representatives, successors, and assigns for any and all injuries suffered by me in this event. I attend and verify that I am physically fit, and have sufficiently trained for the completion of The Palisades-Will Rogers 5K & 10K Run and Kids' Run and my physical condition for participants in this type of event has been verified by a licensed Medical Doctor during the last 6 months.

Signature

_____ Parent or Guardian

_____ Date