

SEPT. 25, 2010
Lagoon Valley Park
Vacaville, CA. 8:45 a
 4600 Pena Adobe Rd:
 I-80 & Pena Adobe Exit.

Benefiting the Jack & Julia
 TSC Clinic at:



KAISER
 PERMANENTE. **thrive**



FRS HEALTHY ENERGY
 The FRS Company | FRS.COM



For Tuberous Sclerosis Complex
10K Trail, 5K Road, 2 Mi Walk, 1/4 & 1/2 Mi Kids

Part of the **2010 Fleet Feet Sports Trail**
Run Series: www.fleetfeetvacaville.com/trail-run-series for info: 449-9266

Kids Corner, Clown, Raffle/Auction,
 music, race awards, food & more.

1. Choose EVENT: 10K Trail Run (9am) 5K Road Run (9am) 2 Mi Fun (8:45am) KIDS 1/4 or Kids 1/2 (10:30am)

Registration Fees:	On or Before Sept 18	Sept 19-25	Course Maps available online or at Fleet Feet Vacaville.
5K/10K	\$25	\$30	Note: 10K CAPPED at 250 runners, closed when full.
2 Mi	\$15	\$20	5K/10K/2 Mi reg. fees include <u>Technical t-shirt</u> --
1/2, 1/4 Kids	\$12	\$15	up to 1st 500 total guaranteed. Kids: cotton t-shirt.

2. Registrant Information: **TEAM NAME** or **SPONSORING** (PRINT CLEARLY/see below also): _____

Last Name: _____ First: _____ GENDER: M F RACE DAY AGE:

Address: _____ City: _____ Zip: _____ Cell Ph.: (____) ____-____ Hm. Ph.: (____) ____-____

State: _____ Email: _____@_____ Emergency Contact Name/# _____

SHIRT SIZE: *5K, 10K & 2 Mi=TECH Shirts, gender size: S M L XL (Male only) **Kid** S M L
 (2010 tech shirts guaranteed to first total 500 registrants for 5K, 10K, 2 Mi combined)

3. METHOD OF PAYMENT: Cash: Check # (**payable to: Children's Hospital Oakland. note: TSC Clinic**)

Charge: MC VISA AmEx Exp date: ____/____

Card# (# to be shredded) _____ Security Code: _____

Name as on card: _____ **SIGN HERE: X** _____

MAIL or drop off forms to: Fleet Feet Sports, 354 Merchant St. Vacaville, CA. 95688

4. COMPLETE and SIGN: *All entrants must sign waiver below for participation*

Registration fee from above.....\$	<input type="text"/>	<table border="1"> <tr> <td>Again- Team Name:</td> <td>Official Use Only</td> </tr> <tr> <td>TEAM DEADLINE: 9/22</td> <td></td> </tr> <tr> <td>Team Captain:</td> <td></td> </tr> </table>	Again- Team Name:	Official Use Only	TEAM DEADLINE: 9/22		Team Captain:	
Again- Team Name:	Official Use Only							
TEAM DEADLINE: 9/22								
Team Captain:								
Donate to Children's Hospital, TSC Clinic?..\$ thanks!	<input type="text"/>							
TOTAL PAID:\$	<input type="text"/>							

I agree to indemnify and hold harmless Children's Hospital & Research Center Oakland (CHRCO), Jack & Julia TSC Clinic, and the City of Vacaville and its officers, officials, employees, contractors, agents and volunteers (collectively, the "Release Parties") of the above mentioned event from all cost, expense and liability arising out of my (or my child's) participation in this event to benefit the TSC Clinic at CHRCO. I do hereby waive all claims for damage or loss to me or my child's person or property which may be caused by any act, or failure to act, by the Released Parties arising directly or indirectly from my or my child's participation in this event; and I hereby assume liability for any loss, damage, or other liability from such event. I give permission for CHRCO to use photographs of my in promotion and advertising for CHRCO without compensation of any kind. I hereby affirm that I, or my child under the age of 18, am in good condition to participate in the Lagoon Valley Trail Runs for TSC. DATE: _____

SIGNATURE (if under 18, parent/guardian must sign): **X** _____

REGISTRATION & INFO Online: at www.active.com (search "Lagoon TSC") small service fee. **Mail in/drop off:** Fleet Feet, 354 Merchant St. Vacaville 95688. **Pre reg & Packet pickup:** SEPT 24: 4-6 pm at Fleet Feet, 354 Merchant St. Vacaville, or Sept 25 reg: 7:30 am. **Race Chair:** Dena Mitchell dmitch777@mac.com. TSC is a genetic disorder causing tumor growth in major organs, and LVTR is fundraising for the non-profit J & J TSC Clinic at Children's Hospital Oakland. See www.chofoundation.org/lagoonvalleytrailrun. Thanks!