



## DREAM MILE - VIBHA LA 5K RUN/WALK, KIDS 1K WALK

<http://www.thedreammile.org/la>

Saturday, October 22nd, 2011, Woodley Park, 6350 Woodley Ave, Van Nuys, CA

Registration Starts: 8:00 AM

Run/Walk Starts: 9:30 AM

### REGISTRATION FORM

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ T-shirt size (please circle one): S M L XL

Contact me next year about the next Dream Mile event.

\_\_ Yes \_\_ No

Add me to Vibha-LA's e-mail list to keep me informed of events and activities.

\_\_ Yes \_\_ No

Contact me about volunteer opportunities.

\_\_ Yes \_\_ No

PARTICIPATING EVENT (mark with X- select only one) \_\_ 5K Run \_\_ 5K Walk

REGISTRATION FEES\* (Not refundable/transferable):

Children (Age 12 and under): NO CHARGE

Children can attend 1K Run/Walk

**5K fun walk/ Run:**

Adults

Individual: \$15 per person (by October 9<sup>th</sup>, 2011)

(\$20 after Oct 9<sup>th</sup> and at the site) \$ \_\_\_\_\_

Groups: \$13 per person

(If postmarked by Oct 9<sup>th</sup>, 2011)

(\$18 after Oct 9<sup>th</sup> and at the site) \$ \_\_\_\_\_

**Note: Groups should be of 3 or more** Individuals

**Donation:** I would like to make an additional tax

Deductible donation \$ \_\_\_\_\_

**TOTAL PAYMENT:**

\$ \_\_\_\_\_

#### Payment Method (Check One)

Check (payable to: Vibha)

Cash (handed to volunteer)

**Please mail completed and signed  
registration form along with your  
check to:**

**Vibha  
12051 Falcon Crest Way  
Porter Ranch, CA 91326**

Vibha is a US-based, volunteer run  
501(c) (3) registered non-profit, non-  
religious, non-political organization  
working to ensure health, education and  
opportunity for underprivileged children.  
For more information, visit [www.vibha.org](http://www.vibha.org)

#### RELEASE (Must be signed by all participants or parent/guardian if under age 18):

I understand that my consent to these provisions is given in consideration of the acceptance of this registration and for being permitted to participate in this event. I am a voluntary participant in this event, and in good physical condition. I KNOW THAT THIS EVENT IS A POTENTIALLY HAZARDOUS ACTIVITY AND I HEREBY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR ANY INJURY OR ACCIDENT WHICH MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT, AND I HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST HELP THEM GROW INC., ITS LOCAL AFFILIATES AND ANY AFFILIATED INDIVIDUALS, VIBHA, ANY RACE SPONSORS AND THEIR AGENTS AND EMPLOYEES, AND ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT (THE "RELEASEES") FROM ANY LOSS, LIABILITY OR CLAIMS I MAY HAVE ARISING OUT OF MY PARTICIPATION IN THIS EVENT, INCLUDING PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SAME BE CAUSED BY FALLS, CONTACT WITH PARTICIPANTS, CONDITIONS OF THE COURSE, NEGLIGENCE OF THE RELEASEES OR OTHERWISE. If I do not follow all the rules of this event, I understand that I may be removed from the competition. I give my full permission to the Help Them Grow Inc. and its local Affiliates and Races and their sponsors and corporate sponsors to use any photographs, videotapes, audiotapes or other recordings of me that are made during the course of this event.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent or Guardian  
if under age 18

\_\_\_\_\_  
Print name of the signed

\_\_\_\_\_  
Date

\*The registration fee covers the cost of a free t-shirt given away

Registration at the venue will start at 8.00 AM. Participants are requested to assemble at venue at least 15 minutes before their starting times.

For further details, visit the event website at <http://www.thedreammile.org/la>, for more details, contact e-mail: [la@thedreammile.org](mailto:la@thedreammile.org) ph. 818-963-1702