

ENTRY FORM

Register online at:
derbyday5k.com

Mail completed entry form to:

**Santa Anita Derby Day 5K, c/o Time Management,
P. O. Box 131314, Carlsbad, CA 92013-1314 • Deadline is March 30**

Name (first) _____ (last) _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ M F Age on Race Day _____ Birthday _____

E-Mail Address _____

Support a Local Non-Profit!

If you choose, you may allocate \$5 of your entry fee to one of our non-profits:

- Methodist Hospital Foundation Arcadia Historical Museum Alhambra High School
- Arroyo High School El Monte High School Los Angeles Arboretum Foundation
- Arcadia High School Boosters Club CARMA

- Check One:** 5K Masters' Run 5K Open Run 5K Walk
- Kids' 6-Furlong Race (3/4 mile, 7-12 years) Homestretch Dash (1/8 mile, 6 & under)

Fees: (All entries receive a T-shirt, medal and photos)

Adult Entry, **\$38.00**
(After 4/3/19, \$40.00; Race Day, \$43.00) \$ _____

Seniors (65+) Entry, **\$36.00**
(After 4/3/19, \$38.00; Race Day, \$40.00) \$ _____

Youth (18 & under), **\$25.00**
(After 4/3/19, \$30.00) \$ _____

Total Enclosed \$ _____

Team Name _____

Personalized Bib (must be received by 3/18/19) _____

T-Shirt Size (Men/Unisex) S M L XL XXL XXXL

T-Shirt Size (Women) XS S M L XL XXL T-Shirt Size (Youth) S M L

WAIVER: (Must be signed)

I hereby release Santa Anita Park (TSG Developments Investments, Inc., TSG Developments Land Holdings, Inc., and/or Santa Anita Land Holdings LLC and/or Los Angeles Turf Club, Incorporated, etal), the City of Arcadia, Methodist Hospital of Southern California, Kathy Kinane and Kinane Events, Inc. and employees, and all municipal agencies whose property and/or personnel are used, and other sponsoring or co-sponsoring company(ies), agency(ies) or individual(s) from responsibility for any injuries I may suffer as a result of my participation in the Santa Anita Derby Day 5K. I hereby certify that I am in good condition and am able to safely compete in this event. I hereby consent to receive medical treatment which may be deemed advisable during this event and understand that I am solely responsible for all costs relating to medical transportation and/or evacuation. I will additionally permit the use of my name and pictures in broadcasts, telecasts, newspapers, brochures, etc., and also understand that the entry fee is non-refundable. As a participating athlete I certify that all information in this form is true and complete. I have read the entry information provided for the event and certify my compliance with my signature below. Santa Anita Park and Kinane Events, Inc. reserve the right to refuse any entry application. Entry is non-transferable.

Signature of athlete _____ Date _____ (Signature of parent if under 18 years) _____

IF ATHLETE IS UNDER AGE 18: This is to certify that my son/daughter has my permission to compete in the Santa Anita Derby Day 5K, is in good physical condition, and that race officials have my permission to authorize emergency treatment if necessary.

PLEASE MAKE NON-REFUNDABLE CHECK PAYABLE TO: SANTA ANITA DERBY DAY 5K

Rain or Shine Event • Please NO Dogs!

Proceeds benefit the Arcadia High School Athletic Boosters Club (which funds the school's sports programs for both boys and girls), Arroyo High School, Alhambra High School, El Monte High School, the Arcadia Historical Museum, Los Angeles Arboretum Foundation, Methodist Hospital Foundation and CARMA, which finds homes for retired racehorses.