



**\$100-\$5,000 Sponsorship Opportunities Available!**

Contact Donna Duperron at (310) 540-6688

**Entry Fees By 5/7/20: \$38/person & from 5/8-5/16: \$45/person**

**RUN/WALK ALONGSIDE OUR HEROES IN THE ARMED FORCES!**  
**SATURDAY | MAY 16TH | 8AM**  
 DEL AMO FASHION CENTER | MADRONA AVE. ENTRANCE  
 BETWEEN W. CARSON ST. & FASHION WAY  
 Visit **TORRANCE5K.COM** to register as an individual or team!

**Questions? Call the 5k Hotline! 310-220-0233**

**5K Participants Enjoy...** Commemorative Event T-Shirt  
 Computerized Finish Times | Water Stations  
 Free Food & Beverage Giveaways | Exhibitor Booths

**1st Place Overall Male & Female** Is Invited to Ride in the *61st Torrance Armed Forces Day Parade* Immediately Following the 5K For Freedom!

**DIVISIONS** (check one)

- 8 & under
- 25-29
- 45-49
- 65-69
- 9-12
- 30-34
- 50-54
- 70-74
- 13-17
- 35-39
- 55-59
- 75-79
- 18-24
- 40-44
- 60-64
- 80 & Over

**TEAM NAME (If Applicable):** \_\_\_\_\_

\_\_\_\_\_  
 FIRST NAME LAST NAME SEX F [ ] M [ ]

\_\_\_\_\_  
 ADDRESS BIRTHDAY \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
 CITY ZIP CODE AGE (ON RACE DAY) \_\_\_\_\_

\_\_\_\_\_  
 EMAIL

T-SHIRT SIZE (CIRCLE ONE): SMALL MEDIUM LARGE X-LARGE

**WAIVER FORM:** Entry without signed Waiver Form will be returned. This waiver contains limitation of your legal rights. Your Signature below means you and/or your parent/guardian has read it and agrees with the statement below:  
**WAIVER:** In consideration of my, and/or my dependent's participation in the Torrance Armed Forces Day Run, I hereby release and hold harmless the City of Torrance, TACC, Del Amo Fashion Center, Village Runner, Village Runner Racing, and all of its sponsors, their affiliates, agents, servants, employees, volunteers, assigns successors, and heirs or distribution and all officials concerned for any acts, omissions, or negligence which may result in any bodily injury (including death) and/or property, loss of damage incurred by me arising out of or in connection with my and/or my dependent's participation in this event. I warrant that I and/or my dependent are in good health and have trained sufficiently for this event. I willingly assume any risk inherent in entering this event. This waiver extends to all claims of any kind and nature whatsoever, whether known or unknown. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for legitimate purposes.

\_\_\_\_\_  
 PARTICIPANT SIGNATURE DATE LEGAL GUARDIAN (IF UNDER 18 YEARS) DATE

**MAIL COMPLETED FORM W/ PAYMENT TO: Village Runner Racing\*, 318 Ave. I, #509 | Redondo Beach, CA 90277**  
**\*PICK UP PRE-RACE PACKET ON MAY 15 | NOON-7PM ~ LATE REGISTRATION | 6:30AM AT EVENT ~ MAKE CHECKS PAYABLE TO: VILLAGE RUNNER RACING**