

2021

Sponsoring
SURVIVORSHIP



2K Walk • 5K Walk • 5K Run • 10 K Run

RUN & WALK

Saturday, October 2nd 2021 8:30AM Silveira Community Center

500 North Main Street, Downtown Lakeport

Registration Fee: \$25.00

Mail in or Online Registration by 9-25-2021

Morning Registration 7:00 AM TO 8:30 AM

Event Starts at 9:00 AM RAIN OR SHINE

Bring the family to Sponsoring Survivorship's 25th Annual Walk/Run. There will be refreshments and raffle prizes. All participants will receive a free T-Shirt. Everyone is a Winner! Special thanks to our Business Sponsors and our Local Community. Please be aware of Local Covid-19 restrictions.



For More Information go to www.sponsoring survivorship.com or contact

Julie Kelley (707) 972-0286, Brandi Cabbage (432) 614-7707 or Shirley Crawford (707) 279-1364

Proceeds benefit Lake County women and men in their treatment against breast cancer • Non Profit #45-3321877

Sponsoring Survivorship Registration Form 2021

Name (Please Print) _____ Phone _____

Mailing Address _____ City _____

Email Address _____

I will participate in: (Circle one) 2K Walk 5K Walk 5K Run 10K Run

I am a first time Participant:

Circle one: Male Female

Make Checks payable to : Sponsoring Survivorship

Mail to : Sponsoring Survivorship

P.O. Box 1924

Lakeport, CA 95453

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I cannot Walk or Run

but I wish to make a

Donation of \$ _____

Non Profit #45-3321877



Waiver

I know that running a road race is potentially a hazardous activity. I should not enter a run/walk unless I am healthy and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete a race. I assume all risks associated with running/walking this event including, but not limited to: falls, contact with other participants, the effects of the weather, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, knowing all these facts and in consideration of your accepting my entry, I for myself, heirs, and anyone entitled to act on my behalf, waive and release forever Silveira Community Center, City of Lakeport, County of Lake and all sponsors, their employees, representatives and successors from all claims and liabilities.

_____/_____
Signature (Parent or Guardian if under 18)

Date