To assist in fundraising efforts, the Fielding School will build each team member an individual fundraising page that streamlines the online donation process for friends, family, coworkers and anyone else you ask to support your run. You can check out a few sample runners’ pages by visiting us on the web.

The Fielding School will provide tips on how to fundraise and sample language to use in outreach to your supporters. We will also highlight specific runners to drive additional donations to their pages.

All individuals running with the UCLA Fielding School of Public Health in the 2015 ASICS LA Marathon understand the following:

- While we hope most runners will raise more, all charity relay runners must raise a minimum of $500 (level set by LA Marathon relay rules). All funds raised will be used to support summer fieldwork studies for students at the UCLA Fielding School of Public Health.
- All registration fees are non-refundable.
- All runners should be aware that there are some risks involved in athletic activities such as long-distance running. Please be sure to consult with a physician before beginning your training.

Please carefully read the disclosure form on the following page, sign and return the form to us by faxing it to 310-825-9690 or by scanning and emailing it to slucasi@support.ucla.edu.

If you have any questions about registration or fundraising for the Fielding School through your participation in the 2015 ASICS LA Marathon Charity Relay, please contact Stephen Lucasi at (310) 825-0992 or slucasi@support.ucla.edu.

Happy running!
Waiver: In consideration of being permitted to participate in any way in the 2015 ASICS LA Marathon Charity Relay and/or Fielding School marathon team and any associated activities, hereinafter collectively called “Activity,” I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue the Regents of the University of California, its officers, employees, and agents from liability from any and all claims resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity.

Assumption of Risks: Participation in Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The risks may arise from a variety of sources, including crime, terrorism, civil and political unrest, disease, and accidents. The specific risks vary from one activity to another, but potential injuries are physical, mental, emotional, and financial, and include catastrophic injuries such as paralysis and death. I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney’s fees brought as a result of my involvement in Activity, and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgement of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

_________________________________________    ______________________________________    ____________
Signature of Participant    Print Name    Date

This Form Cannot be Altered Except with the Express Permission of Counsel for UCLA.