

VALLEY CREST HALF MARATHON

A Road Runners Club of America 2010 State Championship Race

Sunday, June 13, 2010 - 8:00 a.m.

9th Annual race to benefit the New Basin Blues' Running Club High School Cross Country Fund; Garden of Angels; Para los Ninos

A challenging, mountain half-marathon on historic Mulholland fire road, treating runners to beautiful spring foliage and magnificent vistas of the San Fernando Valley. No wheelchairs, bikes, baby joggers or dogs permitted on the course.

● NO BANDIT RUNNERS PLEASE - POR FAVOR, NO BANDITOS ●

Start & Finish: Marvin Braude Mulholland Gateway Park (south end of Reseda Blvd at dirt Mulholland fire road).
Course Records: Romualdo Sanchez (1:13:47~2007); Alejandra Alonso (1:30:21~2008).
Directions: Marvin Braude Mulholland Park; Exit the 101 at Reseda Blvd. Go south on Reseda Blvd. approximately 4.0 miles to the end. Please follow directions of the parking attendants. Parking fees are included in race registration.
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Times: Race starts at 8:00 a.m. - Mile 7 cut off time at 9:30 a.m. - Course closes at 11:00 a.m. - No early starts. Three stations (mile 3.5, mile 7, mile 10); All runners are encouraged to carry a water bottle.
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Prize Purse: Overall male and female winners each receive prize package (cash & merchandise) valued at \$500.00!
Awards: Awards three deep in 5-year male/female age divisions; Sponsor awards to 1st place division winners! T-Shirt; post race refreshments; Free Raffle with spectacular Sponsor-donated prizes.
Runner's Package: post race refreshments; Free Raffle with spectacular Sponsor-donated prizes.
Pre Registration: \$60.00 postmarked by 5/10. NOTE: Snail mail registration ends on 5/10.
Late Registration: \$65.00 after 5/10. Shirts and shirt sizes not guaranteed for late registrants.
Mail Registration to: Dervin/PO Box 17900/Encino/91416 NOTE: Snail mail registration ends on 5/10.
Checks Payable to: TRAILRUNEVENTS (Entries are not refundable, transferable, or deferrable to another race).
Race Day Registration: \$70.00, as space permits. Runner check-in and late bib pick-ups from 6:30 a.m. to 7:45 a.m.
Volunteers: To volunteer for this event, please contact the volunteer E-mail: trailrunvolunteers@yahoo.com!
Direct questions to: E-mail: valleycrestun@yahoo.com Tel: 818-591-1862 Website: www.trailrunevents.com

YOU MAY ALSO REGISTER ONLINE AT

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Please P R I N T legibly in ALL CAPITAL letters

Last Name: _____ First Name: _____ Gender: M F

Age on Race Day (no runners under 16 yrs): _____ E-Mail: _____

Address: _____
Street Apt. City State Zip

Day Phone: (_____) _____ Eve Phone: (_____) _____

REQUIRED: Race Day Emergency Contact Name: _____ Phone: (_____) _____

Preferred Shirt Size (circle) M L XL (shirts and sizes not guaranteed for late registrants)

How many VCHMs have you run? _____ How did you learn about the race? _____

THIS IS A RELEASE - IT CONTAINS LIMITATIONS AND LIABILITY... As a participant in the Valley Crest Half Marathon, I am aware of the rigors and dangers of long distance running. I understand that trail running involves being in remote areas for extended periods of time, far from services, that these areas may have many natural and man-made hazards which Race Management can not anticipate, identify, modify or eliminate and injury can happen to anyone, at any time. In accepting this entry to the Valley Crest Half Marathon, I agree to take full responsibility for myself. I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against Nancy Shura-Dervin, Larry Dervin, TrailRunEvents, the UltraLadies/New Basin Blues running clubs, the Santa Monica Mountains Conservancy, the City of Los Angeles, Topanga State Park, and their representatives, successors, and assigns for any and all injuries suffered by me in said event. I further assume any and all financial responsibility that may be incurred in the event I require emergency evacuation from the racecourse, including but not limited to air evacuation. I understand that Race Management reserves the right to enforce race rules intended for the safety of runners and/or may create new race rules, as required during the event. I attest and verify that I am physically fit and have sufficiently trained for the completion of this race, and my physical condition to run this event has been verified by a licensed medical doctor. I understand and agree to the use of my name, pictures and interviews in association with the Valley Crest Half Marathon for use in broadcast, telecast, advertisements, books, films, videotape or any other reproduction thereof, with no monetary or other compensation to me. I understand that I must be present to claim any awards/prizes to which I may be entitled.

SIGNATURE (Parent signature if entrant is under 18)

PRINT NAME

DATE