

"Criminal Application"



You are hereby ordered to appear on:

July 11, 2015

11:59pm
Running with the Cops for 3.1 Miles



Official T-shirts to first 250 Pre-Registered Suspects

Place: Downtown Pittsfield, MA. **Race Starts at Midnight!**

Purpose: Proceeds to benefit Special Olympics Massachusetts, proudly presented by your local Law Enforcement officers

Suspect Court Fine: \$20.00 (checks made payable to Special Olympics Massachusetts)

Day- of Court Appearance: \$25.00

Awards: Cash prizes for top male & female finishers

For information contact: Officer Darren Derby at 413-448-9700 x359 or dderby@pittsfieldpd.org or Alli Banks at 508-485-0986 x238 or Alli.Banks@specialolympicsma.org

Registration Form

Suspect's First Name: _____ Suspect's Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Email Address: _____ Phone: _____ Gender: _____ Age: _____

Emergency Contact Name/ Number: _____ Shirt Size: _____

Are you a member of Law Enforcement? _____ If you are a student, which school do you attend? _____

Are you:

___ Running

___ Walking

Complete entry form and mail or drop off to:

Special Olympics Massachusetts, Attn: Alli Banks 512 Forest Street Marlborough, MA 01752

Pittsfield Police Department, Attn: Officer Derby 39 Allen Street Pittsfield, MA 01201

Get more details by visiting us at [Facebook.com/LETRBERKSHIRESOMA](https://www.facebook.com/LETRBERKSHIRESOMA)

SPECIAL OLYMPICS MASSACHUSETTS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

In consideration of participating in the Special Olympics Massachusetts 2014 LETR Run From the Cops 5K, I represent that I understand the nature of Special Olympics 2014 LETR Run From the Cops 5K and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I and/or my minor child believe event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Activity. I fully understand that the Special Olympics Massachusetts 2014 LETR Run From the Cops 5K event involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions or inactions, those of others participating in the event, the conditions in which the event takes place or the negligence of the "Releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs and damages I and/or my minor child incur as a result of I and/or my minor child's participation in the Activity. hereby release, discharge, and covenant not to sue Special Olympics, Inc., Special Olympics Massachusetts, its respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost which any may incur as the result of such claim. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I recognize that this event, like other sporting events, presents an element of risk. I certify that I am fully capable of participating in this challenging activity. I agree to assume all risks involved in this event and release, waive, discharge, hold harmless, indemnify and covenant not to sue any of the employees, volunteers, sponsors, or any and all agents associated with Special Olympics Massachusetts, Special Olympics Inc., or any other organization directly or indirectly involved in this event. I hereby consent to and authorize the use and reproduction by Special Olympics Massachusetts, or anyone authorized by Special Olympics Massachusetts, of any and all photographs, audio and video recording, or any other records which are taken of me in conjunction with this event for any purpose whatsoever without any compensation to me. I have read this release and waiver of liability, assumption of risk and indemnity, and photograph/recording release and fully understand it.

Printed Name of Suspect

Signature of Suspect (only if age 18 or older)

Date

Signature of Parent/Legal Guardian (if Suspect under age 18)