



THE OAK BROOK HALF-MARATHON

Labor Day – Monday, September 7, 2009



Volunteer Response Form

We need your assistance to make the Oak Brook Half-Marathon a success and truly value your participation. Please complete this form and return it to us by August 30, 2009. See below for e-mail and fax delivery instructions.

Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____

E-Mail: _____ Age: _____

Please indicate your 1st, 2nd and 3rd choice of assignments:
(Description of volunteer assignments is located on the following page)

VOLUNTEER OPTIONS:

- | | | |
|--------------------------------|-----------------------|-----------------------|
| _____ Goody Bag Stuffing | _____ Traffic/Parking | _____ Junior Races |
| _____ Pre-Registration | _____ Gear Check | _____ Clean-up |
| _____ Race Day Set-up | _____ Course Marshal | _____ Aid Station |
| _____ Race Day Registration | _____ Refreshments | _____ Area Captain |
| _____ Race Packet Distribution | _____ Finish Line | _____ Anywhere Needed |

Have you volunteered at racing events before? Yes No In what Area? _____

Once we receive your completed form, you will be assigned and notified of your area via e-mail. We will do our best to accommodate all requests, but please know that we value your service wherever you help us, and reassignments are possible.

We look forward to having you on our team for The Oak Brook Half-Marathon!

Please check your T-Shirt Size (preference):

Sizes	Small	Medium	Large	Extra-Large
Adult				

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT:

IN CONSIDERATION of being permitted to compete, officiate, observe, work for, or participate in any way in the Oak Brook Half-Marathon (hereinafter, the "EVENT(S)"), EACH OF THE UNDERSIGNED, for himself, his personal representatives, heirs, and next of kin: 1) HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE Deluxe Distance Productions LLC, the Chicago Area Runners Association, AthletiCo Employment Services LLC, The Runner's Soul, the Village of Oak Brook, Illinois, The Oak Brook Park District, DuPage County, Illinois, Illinois Department of Transportation, DuPage County Forest Preserve District, USATF, any and all municipal agencies whose property and/or personnel are used or in any way assist, all sponsoring or co-sponsoring companies, volunteers or individuals related to the EVENT(S), together with their officers, directors, shareholders, successors and assigns, premises and event inspectors, surveyors, underwriters, consultants and others who give volunteer support, first aid, medical attention, recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or EVENT(S) and each of them, their directors, officers, agents and employees, all for the purposes herein referred to as "Releasees," FROM ALL LIABILITY, TO THE UNDERSIGNED, his personal representatives, assigns, heirs, and next of kin: 1) FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFOR ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE; 2) HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST, including attorneys' fees, they may incur arising out of or related to the EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE; 3) HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise; 4) Hereby grants any medical director of the Event and his/her agents, affiliates and designees, access to all medical records (and physicians) as needed and authorizes medical treatment as needed; 5) understands that he/she has the right in refuse medical care and advice of EVENT(S) medical directors and representatives; if Undersigned's medical condition becomes such that the Undersigned's mental capacity is questioned, the physician has the right to recommend and initiate treatment of the Undersigned; 6) assumes liability for any and all medical expenses incurred as a result of training for and/or participation in the EVENT(S), including but not limited to ambulance transport, hospital stays, physician and pharmaceutical goods and services; 7) HEREBY acknowledges that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. 8) HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasees and is intended to be as broad and inclusive as is permitted by the laws of the State of Illinois and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. 9) The Undersigned warrants that all statements made herein are true and correct and understands that Releasees have relied on them in allowing the Undersigned to participate in the Event. I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

All rights reserved by Deluxe Distance Productions LLC.

Send via e-mail to: vol@oakbrookhalfmarathon.com
Attn: Volunteer Coordinator

Send via fax to: (630) 832-5180
Contact by phone: (708) 386-4660

Signature: _____

Signature: _____
Parent or Legal Guardian if Participant is under 18 years of age:

Volunteer: _____ Date: _____

_____ Date: _____



www.oakbrookhalfmarathon.com

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Volunteer Assignment Description

Thanks for volunteering! This race would not be possible without the help of our volunteers. Below you will find a brief description of available assignments. Please feel free to contact us with any questions you may have.

GOODY BAG STUFFING: Volunteers will assist with stuffing flyers and promotional items in runners/walkers' goody bags. Date: Sunday, August 30, 2009. Time: 5:00 p.m. Location: The Runner's Soul, 124 S. York Street, Elmhurst.

PRE-REGISTRATION: Volunteers will process registrations, and distribute goody bags, timing devices and shirts to runners who pre-register. Dates: Sept. 2-6, 2009. Location: The Runner's Soul

RACE DAY REGISTRATION: Volunteers will process race day registrations, greet runners, provide information, and offer assistance as needed.

RACE PACKET DISTRIBUTION: On race day morning, Volunteers will distribute race packets, including race bibs, timing devices, shirts and goody bags to all runners who have completed their registration.

TRAFFIC / PARKING: Volunteers will help direct participants to the parking lot and race area.

GEAR CHECK: Runners and walkers have the opportunity to store their gear in a secured area until the race is over. Volunteers will collect and store gear until it is picked up following the completion of the race.

COURSE MARSHAL: Course Marshals will be on the course directing runners/walkers, assisting with traffic control and monitoring the safety of our participants.

AID STATION: Volunteers will serve water, replacement drinks and energy gel to runners at designated stations on the course during the race.

FINISH LINE: Volunteers will be stationed at the finish line to distribute finisher's medals and direct runners to the post-race refreshments.

RUNNER REFRESHMENTS: Serve food and drink to the runners after the race.

JUNIOR RACES: Volunteers will assist in the coordination of children's races.

CLEAN-UP: Assist with the break-down and clean up of the grounds after the close of the event.

AREA CAPTAIN: Volunteers must be responsible adults willing to assume command and oversee other volunteers in one of the above areas, and provide guidance and direction as needed.

ANYWHERE I AM NEEDED: Volunteers will be assigned to any area in need of additional service.

If you have any questions, please e-mail vol@oakbrookhalfmarathon.com, Attn.: Volunteer Coordinator, or phone: (708) 386-4660.