



5K Fun Run/Walk | Sunday | November 7, 2004 | 9 am | Stanford University

RACE PROFILE

A 5K fun run/walk to raise awareness and funding for the fight against pulmonary hypertension, a disease which affects the hearts and lungs of children and adults. All ages and abilities welcome. PH patients will receive special recognition and an early start time (if desired). All proceeds benefit the Ewing Family Fund for Pulmonary Hypertension Research and the Pulmonary Hypertension Association.

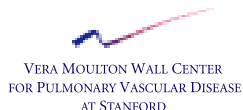
The run starts just south of Stanford University Football Stadium, runs through the heart of campus, and finishes in the stadium. It is a flat, fast, paved course. Prizes awarded to top team, male and female runners. A team consists of four participants (best combined time). Special kids prizes for under 12 age group. Registration fee includes an event t-shirt (long sleeve), goody bag, and refreshments at the finish line.

Help us further our cause by raising funds as a pledged runner/walker. Ask you employer, co-workers, relatives, and friends to sponsor you in this event. Download a pledge form at www.raceforph.org or contact us for further information. As a race participant you are not required to raise pledges.

FOR MORE INFORMATION OR TO VOLUNTEER

Please contact the Vera Moulton Wall Center at 800.640.WALL(9255) or by email: wallcenter@stanford.edu, or visit our website at: www.raceforph.org.

Presented by:



:: ENTRY FEES ::

\$25.00 before 10/28/04
\$30.00 on race day

HOW TO REGISTER

:: Online ::

www.active.com
keyword "PH Race"

:: By Mail ::

770 Welch Road, Suite 400,
Palo Alto, CA 94304-5715

Make Checks Payable To:
"VMWC/Race Against PH"

:: Fax ::

(650) 723-3780 (credit card only)



Pre-Registration Deadline is 10/28/04

:: 2004 Race Against PH ::

Registration Fee \$_____
(\$25 before 10/28/04, \$30 race day)
Optional tax deductible donation \$_____
Total Enclosed \$_____
T-Shirt Size: Adult S M L XL XXL
Youth XS (2-4) S(6-8) M(10-12) L(14-16)

Payment:

Check Visa Mastercard
Card # _____ - _____ - _____
Expiration Date (mm/dd/yy) ____/____/____
Name _____
As it appears on card

Last Name _____ First Name _____
Please print clearly
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____ Age _____ Sex: M F

WAIVER: I, _____, intending to be legally bound for myself, my heirs, executors, and administrators, waive and release any and all rights and claims I may have against Stanford University, its Trustees, officers, agents, directors and students for any and all injuries or damages of any nature, including death, which I may suffer while participating in the Race Against PH sponsored by the Vera Moulton Wall Center, Ewing Family Fund, J&A Productions, and all staff and volunteers connected with the event. This release shall not be binding for any injury, claims or damage resulting from the sole negligence of Stanford University. I give my full permission to the Wall Center and their sponsors to use any photographs, videos, or other recordings of me that are made during the course of this event.

Signature _____ Date _____
Parent or guardian if participant is under 18

- I have Pulmonary Hypertension
- I am participating in support of: _____
- I am participating in memory of: _____
- Volunteer** - Complete registration form. *No fee required.* All volunteers will receive an event t-shirt.
- Team Registration** - Teams are made up of 4 or more individuals. Each participant must register. Teams will be contacted prior to race day with additional instructions. Team Name _____
- Pledge Participant** - I would like to further support the cause by raising funds as a pledged runner/walker. Please contact me.

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