IN RECOGNITION OF POLICE WEEK
THE HAWAI‘I POLICE DEPARTMENT
AND CRIME STOPPERS HAWAI‘I
PRESENT THE 1ST ANNUAL

RUN TO HONOR
5K RUN – 2 MILE WALK
SATURDAY – MAY 17, 2014
LILI‘UOKALANI GARDENS IN HILO

To honor the memory of those officers who gave the ultimate sacrifice
and to promote crime prevention through the use of Crime Stoppers.

An event for the whole family, including food, entertainment, informational and activity booths,
prizes, a water slide for the keiki, and much more.

Start Time:
8:30 AM - 5K Run or 2 Mile Walk
9:30 AM - Keiki Fun Run (Ages 6-14 years. Participants must complete a
Keiki Fun Run registration form)

Check-In &
Early Registration:
5K Run or 2 Mile Walk - 7:00 AM - 8:00 AM / Keiki Fun Run - 7:00 AM - 9:15 AM
Optional early check-in, shirt & number pick up: May 14-16, 2014,
1:00pm-3:00pm at the Hilo Police Station, 349 Kapiolani Street.

Entry Fee:
$25 – T-shirt will be provided with entry fee.
DEADLINE to submit registration is THURSDAY, May 1, 2014.
Entries received after the deadline cannot be guaranteed a t-shirt.
LATE ENTRY FEE – $30

Awards:
Male and female age group awards for runners.
Random prize drawings for all participants.
Proceeds from this event will go toward the establishment of a Crime Stoppers/Po
cile Scholarship.

For more information, contact Lt. Darren Horio, Community Policing,
at 961-2350; dhorio@co.hawaii.hi.us,
or visit the Hawai‘i Police Department’s website at www.hawaiipolice.com.

REGISTRATION FORM
PLEASE RETURN THIS PORTION

CHECK ONE:  ☐ 5k Run  ☐ 2 Mile Walk

LAST Name (print) FIRST Name (Print) M or F Circle Age on race day Date of Birth

Street Address City State Zip Code Phone

Preferred Adult Shirt Size (Circle One): S  M  L  XL  2XL  3XL

MAKE CHECKS PAYABLE TO “CRIME STOPPERS HAWAII”
Mail to: “RUN TO HONOR”, c/o Hawai‘i Police Dept., 349 Kapiolani Street, Hilo, HI 96720

WAIVER MUST BE READ, AGREED AND SIGNED BELOW BEFORE REGISTRATION IS ACCEPTED:  I know that running a road race is a
potentially hazardous activity. I should not enter or participate in this run/walk event unless I am medically able and properly trained. I assume all risks associated with participation in this event including, but not
limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic conditions on the course, and all such risks being known and appreciated by me. Having read this
waiver, and knowing these facts and in consideration of your accepting entry, I, for myself and anyone entitled to act on my behalf, waive and release Crimestoppers Hawaii, the County of Hawaii, State of Hawaii
and all associated sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or
carelessness on the part of the persons named in this waiver. All fees are non-refundable.

Signature of participant, or if under 18, signature of parent or legal guardian Date

FOR EVENT PERSONNEL ONLY Payment Type: Cash  ______ Check No: _________ $  ____________