Dear Team Captain,

Welcome to #EFC24Hour 16th Annual 24-Hour Relay Challenge, Memorial Day Weekend, May 23-24, 2020 at Oakland Technical High School. The 24 Hour Relay is a community celebration, that brings students together to a substance and violence-free environment, encouraging young adults that they can have fun without drugs and alcohol.

This packet provides you with everything you need to register a team, to gain sponsorships, and to prepare for the Relay experience.

Enclosed you will find the following:

- General Information
- Participation Rules
- Coordinator & Captain Responsibilities
- Team Information Sheet
- Participation Agreement
- Waiver & Emergency Contact information form

Sponsor donation forms are available upon request. They are used to record donations made by the community and should be submitted with the registration fee.

A mandatory Captains/Coordinators’ meeting will be held on Friday May 15, 2020, at 3:30 pm at Oakland Technical High School, Zoom meeting invite available upon request, we will provide the Captain with the following information:

- Site map with the location of tent sites, restrooms, snack bar, first-aid station, etc.
- Relay program
- What-to-bring list
- Participant Rules
- General Information
- Last-minute instructions

We suggest you meet with your entire team in order to be clear on expectations, coordinate plans, and avoid last-minute drop-outs, which can be very difficult to deal with. Sending thank-you letters to sponsors would be a nice touch. Thanks for being part of “The Challenge!”

Sincerely,

Jeanally Rangel            Robert Ferguson            Vanessa Cortez
Event Manager            Registration Manager     Office Manager
(510) 905-9222            (510) 529-6612                (510) 798-1072
24 Hour Relay Challenge
TEAM REGISTRATION

REGISTRATION INFORMATION

- An ADULT TEAM: consists of 10 adult members. The Adult Team registration fee is $600, making each adult team member responsible for a $60 minimum entry fee.

- A STUDENT TEAM: consists of 10 student members. The student team registration fee is $500, making each student responsible for a minimum of $50 entry fee.

- A MIXED TEAM: consists of 10 members, adults and students. Each adult on the team is responsible for $60 and every student is responsible for $50.

TO REGISTER FOR THE 16TH ANNUAL 24 HOUR RELAY CHALLENGE COMPLETE THE FOLLOWING INSTRUCTIONS BELOW!!!!!!

Before registering for the 24 Hour Relay a Crowdrise account MUST be created (Instructions are below)

1. Go to http://l.ead.me/bb7DcL click the “Log In” tab in the top right corner of the screen right next to the search bar.
2. After you click the Login button you will be directed to the login screen, on that screen that you will click the signup button at the bottom of the page
3. Lastly after clicking the signup button you will fill out the requested information click sign up and you are done!

Once that process is complete you are now ready to register your team and create your own fundraiser

1. Enter this web address below into your URL bar : http://l.ead.me/bb7DcL
2. If you are creating a team Click on “Join” This button is located at the center of the page

PLEASE CLICK THE “JOIN” BUTTON AT THE CENTER OF THE PAGE

3. IF YOU ARE THE TEAM CAPTAIN STARTING A TEAM click “Create Your Own Team” and complete the required instructions.
4. IF YOU ARE JOINING A TEAM - Find the name of your team that will be listed below after you click the “Join a Team”

P.S. - A prompt will let you know that you successfully created your team or joined a team!
24 Hour Relay Challenge
RELAY RULES AND REGULATIONS

1. No alcohol, tobacco or any drugs at the relay.

2. No Fighting

3. Participants must remain at the relay for the entire 24 hours.

4. Each team must have a Designated Captain.

5. One member of each team must be on the track AT ALL TIMES

6. Each student team must have two parent coordinators present at all times; both of these adults must be a parent of a team member.

7. Once the order of the participants is set this “running order” must be maintained throughout the relay.

8. If a team member has an emergency or disqualifies themselves from the relay, the team must continue with the remaining team members.

9. The baton must not leave the track.

10. Each person must check in at the scoring table after completing each mile.

AFTER THE FIRST LAP OF THE RELAY CHALLENGE @ 10 AM
THERE WILL BE ABSOLUTELY NO OUTSIDE FOOD TO ENTER
THE RELAY CHALLENGE THIS IS NON NEGOTIABLE
Captains & Coordinators

Enclosed you will find the following forms as well as the rules and regulations, please have them completed and turned in no later than May 15, 2020.

- Team Information Sheet
- Participation Agreement
- Waiver and Emergency Contact Information

Important Dates

- Team Coordinator/Captains meeting Friday, May 15th, 2020 at Oakland Technical High School at 3:30 PM (Zoom meeting available upon request)
- Registration Packets due by Friday, May 15th, 2020

Reminder: The 24 Hour Relay is a Drug, Tobacco, and Alcohol-Free environment

AFTER THE FIRST LAP OF THE RELAY CHALLENGE @ 10 AM
THERE WILL BE ABSOLUTELY NO OUTSIDE FOOD TO ENTER
THE RELAY CHALLENGE THIS IS NON NEGOTIABLE

24 Hour Relay Challenge
COORDINATORS’ & CAPTAINS’ RESPONSIBILITIES

24 HOUR RELAY CHALLENGE
May 23 – 24, 2020
For further information about The Ever Forward Club 24 HOUR RELAY CHALLENGE, or if you would like to participate but can’t find a team, please contact:
24hour@everforwardclub.org
Robert Ferguson (510) 529-6612 // Lorenzo Cooper (510)590-0354 // Vanessa Cortez (510)798-1072
The Ever Forward Club Presents:

15th Annual 24 Hour Relay Challenge

TEAM INFORMATION SHEET

Please check team division status:  □ Student  □ Mixed {Adult/Student}

Team Name: ____________________________________________

Team Captain: __________________________________________

Address & Phone: ________________________________________

Team Coordinators {Student Teams}

    Parent Coordinator: ____________________________________
    Address & Phone: ______________________________________

    Parent Coordinator: ____________________________________
    Address & Phone: ______________________________________

Team School/Club Business Affiliation: ______________________

Team Theme Song (CLEAN VERSION): _________________________

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* “STUDENTS” are participants who attend middle school or high school; “ADULT” is everyone else.

MAKE CHECKS PAYABLE TO: Ever Forward – 24 HR
The Ever Forward Club Presents:

15th Annual 24 Hour Relay Challenge

PARTICIPATION AGREEMENT

Please check one

- [ ] ADULT AGREEMENT
- [ ] STUDENT AGREEMENT

Read the following rules carefully and be sure you are willing to comply with them before signing. If you don’t follow these rules, you will be asked to leave the Relay.

- NO DRUGS, ALCOHOL, OR TOBACCO allowed at the site
- PARTICIPANTS MUST REMAIN IN RELAY AREA FOR THE ENTIRE 24 HOURS.
- Each team must consist of 10 Walkers/Runners.
- Each team must have a designated team captain.
- Each Student Team should have 2 parent/adult coordinators present AT ALL TIMES; both adults must be a parent, family or guardian of a team member.
- Each team must decide the order its members will be walking or running, and this order must be maintained throughout the Relay.
- One member of every team must be on the track at all times.
- Each team member must run or walk exactly one mile when it is their turn.
- NO substitutes or alternate runners allowed. If a team member drops out, the team continues with the remaining members.
- Each team member must carry a baton when on the track and it must be handed to the next walker/runners in the designated baton exchange area. Each Team should bring their own baton or something to use as a Baton.
- Each team member must report to the Scoring Table after completing each mile.
- Slower runners/walkers yield inside lane to fast runners/walkers.
- Each team member must wear shoes while on the track.
- Saturday night at 7:30 PM, school grounds will be closed to non-participants.
- Be aware that if participants fail to participate as they agreed to, they may be asked to leave the Relay.
- I understand if I don’t comply with the above rules I may be asked to leave and my parents will be called and asked to pick me up.

Participant Signature_________________________________

Parent Signature_____________________________________

Contact phone #_____________________________________

**** Fill out mandatory Waiver and Emergency Contact Information on back side ****
24 Hour Relay Challenge

WAIVER AND EMERGENCY CONTACT INFORMATION

* STUDENT TEAM *

PLEASE FILL IN COMPLETELY

Name ________________________________________________________________

Address _____________________________________________________________

City ____________________________ Zip ____________________________

Telephone ______________________ Age __________________________

Team Name __________________________________________________________

Team Captain ________________________________________________________

Individuals to contact in case of emergency:
(1) ________________________________________________________________
    Last Name , First Name __________________ Relationship ____________________ Phone #

(2) ________________________________________________________________
    Last Name , First Name __________________ Relationship ____________________ Phone #

If you have a personal physician or hospital preference, please indicate:

Physician Phone #

Hospital Phone #

IMPORTANT WAIVER
I recognize and hereby expressly assume the risks of illness and injury inherent in any exercise program; and I am participating in this event upon the expressed agreement and understanding that I am hereby waiving and releasing Ever Forward-Siempre Adelante, Inc. and its programs, and the 24 HOUR RELAY CHALLENGE and its sponsors and advertisers, agents, and representatives from any and all claims which may have occurred or which may accrue to me, my heirs, guardians, administrators, executors, or assignees including attorney’s fees and court costs (collectively “Claims”) arising out of or in connection with my participating in the 24 Hour Relay Challenge or any illness resulting there from.

PARTICIPANT’S SIGNATURE: ____________________________________________

If you are under 18 years of age, please have your parent/guardian fill out the information below.

In the event of an accident or emergency, I give permission for the school to take my child to any available doctor or hospital, or request their services (you must check one): YES or NO

If NO, please state what action you would like to take: __________________________________________

________________________________________________________________________________________

Note any special medication needs/considerations or allergies: __________________________________

________________________________________________________________________________________

PARENT/GUARDIAN SIGNATURE ___________________________________________________________