

Team Liam

Member Kit

(and Survival Guide)

Table of Contents

| <u>TITLE</u> | <u>PAGE</u> |
|--------------------------------------|-------------|
| Welcome Letter | 1 |
| About Liam's Fund | 2 |
| Important Phone Numbers | 2 |
| Team Liam Training Schedule | 3 |
| Important Dates | 3 |
| Instructions for On-line Fundraising | 4 |
| Instructions for Fundraising by Mail | 5 |
| Sample Fundraising Letter | 6 |
| Donor Mail-In Form | 7 |
| Donation Record Sheet | 7 |
| Participation Form | Last Page |

Welcome to Team Liam


Dear Team Liam Participant,

Congratulations on your decision to join Team Liam and race in the Carlsbad 5000 this coming April!! You are about to embark upon the exciting world of racing while at the same time help those children of San Diego needing neurosurgery. Just think you may even fulfill your New Year's resolution of getting into better shape for 2011!

This is an exciting year to be part of Team Liam. The 2011 Carlsbad 5000 will be our 10th Carlsbad 5000 of participation for Team Liam! Last year was an incredible year for us as Children's Hospital named a new neurosurgery operating room in honor of Liam's Fund for Neurosurgery. We have committed to raising over \$200,000 over the next 5 years. And because of participants like you, we will be able to accomplish this. Over the past 10 years, we've raised over \$250,000 and purchased the equipment housed in the new neurosurgery operating room. We could not have done it without all the dedication from people like you. As well as our mission goal, Team Liam is committed to helping you achieve your personal goal of completing a 5K—INJURY FREE! Please find enclosed in this kit a Liam's Fund brochure, training schedule, important dates and phone numbers, and fundraising information. To culminate the hard work you will do in the coming weeks, we are throwing one heck of a Pasta Party the night before the race. You're in for a great time!

Throughout the next couple of months, if you have any questions, please feel free to call me. I look forward to training with you—Go Team Liam!!

Sincerely,



Michele Weinhouse
Team Liam Coordinator
Home Ph: 760-480-2264
Cell Ph: 760-390-5632
e-mail: michele@weinhouse.com

About Liam's Fund and Team Liam

| Liam's Fund | About Liam | Team Liam |
|--|--|--|
| <p>Every year, hundreds of San Diego children face the anguish of brain surgery. Liam's Fund seeks to raise funds for sophisticated neurosurgical equipment that can reduce the number of surgeries performed and significantly increase the number of successful procedures. We have raised over \$250,000 for neurosurgical equipment. For more information phone (858) 966-5988 or check out our website: www.liamsfund.com.</p> | <p>The importance of this new equipment is best illustrated through a very brave little boy, Liam. Born with congenital hydrocephalus, Liam suffered complications from surgery that ultimately lead to over 75 brain surgeries at four different hospitals throughout the country by the time Liam was just 18 months old. Liam's family hopes that through the equipment purchased with donations raised through Liam's Fund, other children will require fewer surgeries.</p> | <p>Team Liam is a training group designed to help those wanting to train for their first walk/run race. Participants, in turn, promise to raise a minimum of \$100 per individual or \$150 per group.</p> <p>To join Team Liam fill out the Participation Form at the end of this packet and mail in as directed. This year will be our 10th Anniversary racing in the Carlsbad 5000!</p> |

Important Phone Numbers

| | |
|---|--|
| Michele Weinhouse Team Liam | Home: 760-480-2264 Cell: 760-390-5632 e-mail: michele@weinhouse.com |
| Sharon Cherf Team Liam | Home: 858-935-9502 e-mail: sharoncherf@yahoo.com |
| Joan DeVore-Gutierrez & Fabian Gutierrez Liam's Parents | Home: 858-693-3639 Cell: 858-342-8655 e-mail: joaniedevgutz@att.net |
| Carol D. Damon-Scherer Children's Hospital Foundation | Phone: 858-966-7536 e-mail: cdamon-scherer@chsd.org |
| Liam's Fund Website | www.liamsfund.com |
| Carlsbad 5000 Website | http://carlsbad.competitor.com/ |
| Team Liam Miracle Makers Online Donation Page | www.liamsfund.com/donations |

Team Liam Training Schedule 2011

| Week of: | Sun* | Mon | Tue | Wed | Thu | Fri | Sat* |
|---------------|------------------------------|------------------------|-------------------|------------------------|------------------------|-----------------|---------------------------|
| Jan 30 | | | | | | | Team Kick-Off Celebration |
| Effort | Easy/Recovery | Easy | Medium | Easy | Medium | Rest | Hard/Long |
| Feb 6 | Easy Walk/Run (15 min) | Off or XT** | Walk/Run (20 min) | Walk/Run (15 min) | Walk/Run (20 min) | Off | Walk/Run (20-45 min) |
| Feb 13 | XT or Easy Walk/Run (15 min) | Walk/Run (30 min) | Off or XT | Walk/Run (30 min) | Fast Walk/Run (30 min) | Off | Walk/Run (30-60 min) |
| Feb 20 | XT or Easy Walk/Run (15 min) | Off or XT | Walk/Run (20 min) | Walk/Run (15 min) | Walk/Run (20 min) | Off | Walk/Run (20-45 min) |
| Feb 27 | XT or Easy Walk/Run (15 min) | Off or XT | Walk/Run (20 min) | Walk/Run (15 min) | Walk/Run (20 min) | Off | Walk/Run (30-60 min) |
| Mar 6 | XT or Easy Walk/Run (15 min) | Walk/Run (30 min) | Off or XT | Walk/Run (30 min) | Fast Walk/Run (30 min) | Off | Walk/Run (30-60 min) |
| Mar 14 | XT or Easy Walk/Run (15 min) | Walk/Run (30 min) | Off or XT | Walk/Run (30 min) | Fast Walk/Run (30 min) | Off | Walk/Run (30-60 min) |
| Mar 20 | XT or Easy Walk/Run (15 min) | Walk/Run (30 min) | Off or XT | Walk/Run (30 min) | Fast Walk/Run (30 min) | Off | Walk/Run (30-60 min) |
| Effort | Taper | Taper | Taper | Taper | Taper | Taper | Taper |
| Mar 27 | XT or Easy Walk/Run (15 min) | Easy Walk/Run (20 min) | Off or XT | Easy Walk/Run (20 min) | Easy Walk/Run (20 min) | Off | Rest |
| Effort | Give It All | Recovery | Recovery | Recovery | Recovery | Recovery | Recovery |
| Apr 3 | RACE DAY | Rest | Rest | Easy Walk | Rest | Rest | Easy Walk |

*I can train at Miramar Lake on most Saturdays and Sundays between 7 and 9 a.m. Call me (Hm: 760-480-2264, Cell: 760-390-5632) to make arrangements to join me for a run together. **XT stands for cross-training.

Important Dates

| | |
|------------------|---|
| February 5, 2011 | Team Liam Kick-Off Celebration |
| March 18, 2011 | Deadline to sign up for Team Liam |
| March 27, 2011 | Deadline to register online for Carlsbad 5000 separate from Fundraising Team Liam |
| April 2, 2011 | Pasta Party |
| April 3, 2011 | Race Day |
| May 31, 2011 | Deadline to submit final donations to be counted towards individual/group totals |

Instructions for On-line Fundraising

We have the ability to fundraise using the Rady's Children's Hospital and Health Center's Miracle Makers website. This is a great way to fundraise because there is no paperwork or bookkeeping involved on your part! After following the instructions to set-up your webpage, there are many ways to take advantage of On-Line Fundraising such as automatically attaching to your outgoing mail a link to your Team Liam fundraising page. You can also send out electronic letters to all in your address book by following the directions provided after you set up your personal page.

Instructions for setting up your personal webpage as part of Team Liam 2011:

1. To create your personal web page for Hereos for Children's, click on the following link:
www.liamsfund.com/donations
2. Click on the text that says "Join our team of Miracle Makers". This is a link which will begin your personal registration process.
 - a) Follow the direction for entering your personal information.
 - b) There is an option to name your personal fundraising page under "Personalized Web Page Link(s)." The default is your user name but you can change it to something more recognizable like "TheSmithFamily."
 - c) You can choose to donate at this time or wait to donate at a later time. Enter a fundraising goal—it helps donors make a donation when they know your goal. As a member of Team Liam, you are asked to raise a minimum of \$100 by May 31, 2011.
3. Personalize your own page by clicking "Edit my site" under "My HQ" in the left column of the website. You can upload a picture, write your own text and customize the background
4. Send out e-mails to family, friends everyone and anyone asking their support of you and Team Liam by clicking "Email Friends" under "My HQ" in the left column of the website and fill out the form. Mail out your fundraising letter to. Send to everyone with an e-mail address, on your Christmas card list, your kids day-care center, co-workers, etc.
5. **Remember if you don't ask, they can't give.**

Help

For technical questions, contact: sborree@chsd.org. For general questions, contact Michele Weinhouse at 760-390-5632.

Example of a Team Liam member's Miracle Makers Page

<http://miraclemakersonline.kintera.org/faf/donorReg/donorPledge.asp?ievent=344229&lis=1&kntae344229=C2322887029546E6B0D8208755CA097B&supId=75709291>

Warning: Do **not** create your own page from this page you need to create a current 2011 page by following the instructions at the top of this page.

Instructions for Fundraising by Mail

Fundraising Letters

- Mail out your fundraising letter to everyone and anyone. See the example letter on page 6. Send to everyone on your Christmas card list, your kids day-care center, co-workers, etc.
- Give a deadline of no more than 2 weeks. Anything longer and people may forget about your letter.
- Enclose a Team Liam Donor Form with your Fundraising Letter. Make copies of the ones provided. This will contain the information that is needed to insure that a receipt and thank you letter will be mailed to donor.
- **Remember if you don't ask, they can't give.**

Donor Record Sheet

- Copy the donor information from your Donor Form onto your Donation Record Sheet. This is your record of donors and donations. Make a copy for yourself and turn in completed sheet with donations.

How to Submit Checks, Cash & Credit Card donations

- Fill out the Donation Record Sheet with donor info and make a copy for your records
 - For Donor Forms submitted to you
 - Checks: The Donor Form does not need to be mailed in with checks unless no address is printed on check.
 - Credit Cards: Include Donor Forms with submission as it will have necessary credit card information and signature
 - Cash: Fill out Donor Form for each cash donation and write a check for the total cash amount to Liam's Fund for Neurosurgery
 - Mail in donation record sheet, credit card donation forms and checks to Liam's Fund for Neurosurgery, Children's Hospital Foundation, 3020 Children's Way MC5005, San Diego, CA 92123, Attn: TEAM LIAM
 - Fill out the Donation Record Sheet with donor info and make a copy for your records
- Questions in regards to donations call Michele Weinhouse at 760-390-5632

Sample Fundraising Letter

Feb 16, 2011

Dear Aunt Betty,

Maybe it's a higher calling or just my insanity but I've decided to race in my first 5K ever!! What's so special about my decision to race is that I've decided to join a group called Team Liam to help me train for it. Team Liam will train me to run a 5K and I, in turn, raise money for Liam's Fund of Children's Hospital and Health Center here in San Diego. Every year, hundreds of San Diego children face the unimaginable anguish of brain surgery. Liam's Fund seeks to raise funds for sophisticated neurosurgical equipment that can reduce the number of surgeries performed and significantly increase the number of successful procedures. In addition to the training, they provide me with inspiration by matching me up to a child who has recently had neurosurgery. My inspiration is a boy named Liam Gutierrez who was born with congenital hydrocephalus. Liam suffered complications from surgery that ultimately lead to over 75 brain surgeries—all by the time he was just 18 months old!! Liam's family hopes, as well as I hope, that through the equipment purchased with donations raised through Liam's Fund, other children will require fewer surgeries!

As a chemist, I find myself working on projects understanding human diseases on a molecular level. I am now getting an education on understanding diseases at the human level. And what an education, it's given me an added dimension to my motivation each day as a chemist.

I have committed to raise at least \$500 for Liam's Fund. I would like to ask you to join me in my effort. Simply fill out the enclosed Donor Form along with a tax-deductible check, made payable to "Liam's Fund for Neurosurgery" and mail to me by May 1, 2011. Your generosity is greatly appreciated by me, Liam and Liam's Fund of Children's Hospital.

With my sincere thanks,

Michele M. Weinhouse

Team Liam Donor Form

I support _____ who has/have set a personal goal to raise \$_____ by
Team Liam Participant(s)
 racing in honor of _____.

I donate \$_____ to Liam's Fund of Children's Hospital.
Liam's Fund Teammate

Name _____ Phone _____

Address _____

My Company will match this contribution _____ (form attached)

_____ Check enclosed (payable to Liam's Fund, Children's Hospital Foundation)

_____ Mastercard _____ Visa Or _____ American Express

Card Number _____ Expiration date (mo/yr) _____

Card Holder Signature _____

Donation Record Sheet

Team Liam Participant Name _____

Date _____

Donation Record Sheet (Pg _____ of _____)

| | Date | Donor's Name/Address | Phone No. | Donation Amount | Donation Type (Cash, Credit, Company Match); Credit Card Number | Date Rec'd |
|---|------|----------------------|-----------|-----------------|---|------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |

Team Liam Participation Form (Page 1 of 2)

INSTRUCTIONS: Read and fill out entire form. Copies of the form are acceptable. Mail form (BOTH PAGES) and payment to Michele Weinhouse, 3215 Purer Road, Escondido, CA 92029. Questions? Please contact Michele at 760-390-5632.

TEAM LIAM AGREEMENT: I, _____, agree to become a member of Team Liam. As a Team Liam Member, I agree to raise at least \$100/individual or \$150/group for Liam's Fund by May 31, 2011.

_____ As a member, I have enclosed my **\$40.00 registration fee** to join Team Liam; includes registration fee for the Carlsbad 5000 & Team Liam t-shirt. Circle size T-shirt needed: **Youth S Youth M S M L XL.**

_____ As a returning member, I have enclosed my **\$35.00 registration fee** to join Team Liam.

I certify that I am in good physical condition and/or that I have consulted with my physician to participate in Team Liam.

Name _____ Signature _____

E-Mail Address _____ Phone _____

PHOTOGRAPHING CONSENT: I hereby consent to the photographing of myself and the recording of my voice and the use of these photographs and/or recordings singularly or in conjunction with other photographs and/or recordings for advertising, publicity, commercial or other business purposes for Team Liam, Liam's Fund For Neurosurgery and Rady Children's Hospital. I understand that the term "photograph" as used herein encompasses both still photographs and motion picture footage.

Name _____ Signature _____

PAYMENT (circle): **Cash** **Check** **Credit Card**. Make checks payable to Michele Weinhouse, Team Liam Co-coordinator. NOTE: If paying by credit card, billing will read "Lanai City Rental."

_____ Mastercard _____ Visa _____ Card Number _____ Exp. date (mo/yr) _____

CVV2/CVC2 Indicator _____ (last 3 digits on back of card) Signature _____

Billing address, if different than below _____

FUNDRAISING: As part of Team Liam 2011, I consent to have my credit card charged on June 1st to Rady Children's Hospital (Liam's Fund for Neurosurgery) for any balance of the agreed fundraising \$100/Individual or \$150/Group not raised by the May 31st deadline.

Individual Name _____ or Family Name _____

_____ Mastercard _____ Visa _____ Card Number _____ Exp. date (mo/yr) _____

CVV2/CVC2 Indicator _____ (last 3 digits on back of card) Signature _____

Billing address, if different than below _____

Team Liam Participation Form (Page 2 of 2)

CARLSBAD 5000 ENTRY FORM: Include your address, date of birth, age/sex division, T-shirt size and sign waiver.

Name _____

Address _____

City _____ State _____ Zip _____

Male _____ Female _____ Date of Birth ____/____/____

5K Run _____ 5K Walk _____

Emergency Number on Day of Race: _____

Carlsbad 5000 T-Shirt Size **S** **M** **L** **XL** **XXL**

How many Carlsbad 5000s have your run/walked? _____

Carlsbad 5000 Release and Waiver of Liability Agreement

I, the undersigned, voluntarily waive, discharge and release the City of Carlsbad, the North County Transit Development Board (NCTD), the National Railroad Passenger Corporation (Amtrak), the Burlington Northern Santa Fe Railway (BNSF), Competitor Group, Inc., USATF, and all agencies whose property and/or personnel are used, and other sponsoring or co-sponsoring company(ies), agency(ies) or individual(s) from responsibility for any injuries or damages I may suffer as a result of my participation in the Carlsbad 5000 and related events. I hereby certify that I am in good condition and am able to safely compete in this event. I will additionally permit the use of my name and pictures in broadcasts, telecasts, newspapers, brochures, etc. and I also understand that the entry fee is non-refundable and non-transferable. As a participating athlete I certify that all information provided in this form is true and complete. I have read the entry information provided for the event and certify my compliance by my signature below. Bib numbers are non refundable and non-transferable. IF ATHLETE IS UNDER AGE 18: This is to certify that my son/daughter has my permission to compete in the Carlsbad 5000 and related events, is in good physical condition, and that race officials have my permission to authorize emergency treatment if necessary.

Name _____ Date _____

Signature _____