



Cambridge Health Alliance

Jodie Justofin

Manager of Marketing & Events
617.503.3476
617.503.2358 fax
jjustofin@challiance.org

52 Beacon Street, 3rd Floor
Somerville, Massachusetts 02143



Affiliated
with
Harvard
Medical
School



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W WALLACE

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Warner + Associates, Inc.
ARCHITECTURE PLANNING INTERIOR DESIGN

CAMBRIDGE CHRONICLE

ACCENT
BANNER

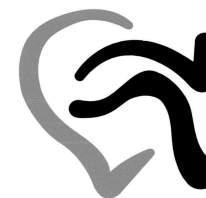
ORTHOPEDIC GROUP INC.
Hanger



Network Health
THE PLAN FOR CARING

The Cambridge Health Alliance is an innovative health care system dedicated to building healthier communities. Comprised of The Cambridge Hospital, Somerville Hospital, and over 20 neighborhood health centers located throughout Cambridge and Somerville, the Cambridge Health Alliance brings the brightest minds and cutting edge medical and psychiatric programs to its patients and communities. Within the system, affiliations include Harvard Medical School, Tufts Medical School, and Partners and CareGroup network providers. The Cambridge Health Alliance also includes the Cambridge Public Health Department, Neville Manor Nursing Home, Cambridge Professional Services Corporation (PSC), and Network Health, a medicaid-managed health insurance plan.

Committed to health care accessibility, service excellence, and choice, the Cambridge Health Alliance provides care to people of all ages, from all cultures, and with all incomes. The cornerstone of its mission is a network of neighborhood health centers, which delivers everyday health care directly into the communities. Many of the physicians and nurses speak the languages and understand the cultures of specific neighborhoods. At the main hospital campuses, speciality services and programs are offered, as well as inpatient diagnostic testing and surgery. For more serious illness, the Cambridge Health Alliance is affiliated with the best hospitals in the area, including Massachusetts General, Brigham & Woman's, and Beth Israel Deaconess.



The Cambridge Health Alliance Inaugural

Run for your Life!
Sunday, May 21st, 2000

www.challiance.org/news/funrun.htm



5K Fun Run/Walk and Healthfest

Sanctioned By:



10:00am-2:00pm Healthfest 12:00 Noon Race

The Cambridge Hospital-Cambridge & Line Street

AND

10:00am - 2:00pm Healthfest

Somerville Hospital Campus

For More Information Call (617) 498-1584



Cambridge Health Alliance
A COMMUNITY OF CARING



Run for your Life!



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A COMMUNITY OF CARING

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10:00am-2:00pm Healthfest 12:00 Noon Race

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AND 10:00am - 2:00pm Healthfest

Somerville Hospital Campus

About the Race

Run for your Life! is the kick-off event for our new Health & Wellness Program. It is a wellness celebration and represents the Alliance's dedication to promoting health and fitness in the Cambridge and Somerville communities. The 5K (3.1 mile) course loops between the two main affiliates of the Cambridge Health Alliance (The Cambridge and Somerville Hospitals). The event will start and finish at the Line Street lot across from The Cambridge Hospital. A Healthfest will take place from 10am - 2pm at the Line Street lot, with activities including sports massages, exhibits on health and fitness related topics, free health screenings, kids fun and more!

Race Day Schedule of Events

10:00am - 2:00pm	Healthfest (health/fitness exhibits, screenings, activities, sampling)
10:00am - 2:00pm	Pre-/Post-Race Massages
10:00am - 11:30am	Race Registration
11:30am - 11:45am	Pre-Race Warm-Up Stretching
12noon - 1:15pm	5K Fun Run/Walk
1:15pm - 1:30pm	Post-Race Cool-Down Stretching
1:30pm - 2:00pm	Awards Presentation

Division Awards (men & women)

18 and under
19 to 29
30 to 39
40 to 49
50 to 59
60 to 69
70 and over
Wheelchair
Employee
Team



Sanctioned By:



INCOMPLETE OR UNSIGNED FORMS WILL NOT BE ACCEPTED. Complete the form below and enclose a \$10.00

(non-refundable) check payable to: The Cambridge Health Alliance Health & Wellness Program.

Alliance employee entry fee is \$5.00.

Mail to:

Cambridge Health Alliance
Marketing & Events Manager
52 Beacon Street, 3rd floor
Somerville, MA 02143

All entrants receive a commemorative race T-shirt and water bottle. DO NOT SEND CASH. Mail-in entries must be received by **Monday, May 15, 2000**. Late registration fee is \$12.00. Participants may submit a late entry in-person on May 21, 2000 during registration from 10:00am to 11:30am.



Cambridge Health Alliance
A COMMUNITY OF CARING



Last Name: _____ First Name: _____ Middle Initial: _____

Street Address (include apartment number or P.O. Box): _____

City, State, Zip, Country (if not USA): _____

Cambridge Health Alliance Employee (yes/no) Campus (Cambridge/Somerville) Age (as of race day): _____

US Citizen (yes/no) Wheelchair: _____ Team (name): _____

How did you hear about the race? _____ Signature: _____

Home Phone: _____ Work Phone: _____ Signature of Parent (if under 18): _____

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against The Cambridge Health Alliance, its entities, sponsors, coordinating groups, the Cities of Cambridge and Somerville, and any individual associated with the event, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Further, I hereby grant full permission to any and all of the foregoing to use my likeness in all media, including photographs, pictures, recordings, or any other record of this event for any legitimate purpose.

Sponsors

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W WALLACE

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ARCHITECTURE PLANNING INTERIOR DESIGN

LOWE'S FLOOR COVERING

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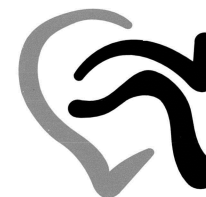
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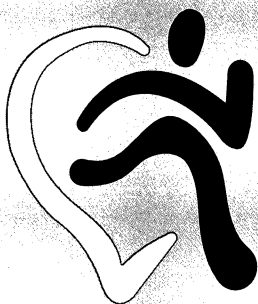
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Run for your Life!



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10:00am-2:00pm Healthfest 12:00 Noon Race
The Cambridge Hospital-Cambridge & Line Street
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Somerville Hospital Campus

Registration

About the Race

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Marketing & Events Manager
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Cambridge Health Alliance
A COMMUNITY OF CARING



Last Name: _____ First Name: _____ Middle Initial: _____

Street Address (include apartment number or P.O. Box): _____

City, State, Zip, Country (if not USA): _____

Cambridge Health Alliance Employee (yes/no) Campus (Cambridge/Somerville) Age (as of race day): _____

US Citizen (yes/no) Wheelchair: _____ Team (name): _____

How did you hear about the race? _____ Signature: _____

Home Phone: _____ Work Phone: _____ Signature of Parent (if under 18): _____

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against The Cambridge Health Alliance, its entities, sponsors, coordinating groups, the Cities of Cambridge and Somerville, and any individual associated with the event, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Further, I hereby grant full permission to any and all of the foregoing to use my likeness in all media, including photographs, pictures, recordings, or any other record of this event for any legitimate purpose.



City of Cambridge

Applications and Petitions #5

IN CITY COUNCIL

April 24, 2000

ORDERED: That, in accordance with the provisions of an ordinance relative to banners, the Commissioner of Public Works be and hereby is authorized to grant a permit to Cambridge Health Alliance to hang two banners across Line Street and Cambridge Street intersection and across Massachusetts Avenue, Central Square.

Provided that, before erecting the above named fire escape the petitioner shall obtain a permit from the Inspectional Services Department and file with the City Clerk a bond in the sum of Two Thousand (\$2,000.00) Dollars, conditioned to save harmless the City of Cambridge from all claims for damages arising from the installation, maintenance and use of said sign.

In City Council April 24, 2000.

Adopted by the affirmative vote of nine members.

Attest:- D. Margaret Drury, City Clerk.

A true copy;

ATTEST:-

A handwritten signature in cursive script that reads "D. Margaret Drury".

D. Margaret Drury
City Clerk

PERMANENT SIGN OR STRUCTURE THAT WILL OBSTRUCT THE PUBLIC WAY
MORE THAN SIX INCHES

Cambridge, April 14 19 00

To the Honorable, the City Council of the City of Cambridge:

EACH PETITION MUST BE ACCOMPANIED BY A DRAWING OF PROPOSED SIGN, INDICATING
DESIGN AND DIMENSIONS AND LOCATION ON PREMISES.

The undersigned respectfully prays that Cambridge Health Alliance be granted permit to erect
2 Banners of the following specifications in front of premises located at Line St. & Cambridge St. intersection
6th Mass. Ave, Central Square at, and owned by City of Cambridge ^(across Line St.)
City Hall. Requested date of hanging: May 6 through May 21st, 2000
Type of sign: temporary street banner (vinyl/nylon) to hang across street
(State whether electric or otherwise and material used in construction) at above designated
Reading matter to go on sign: see attached layout locations

Size: 3' x 20'

Weight: _____

Public Way
Obstruction:

A: 0'
(A: Give exact distance sign
is to extend over sidewalk.)

B: 0'
(B: Also exact distance from bottom
of sign to sidewalk.)

Height Above Grade: Bottom _____ Top _____

APPLICANT HEREBY STATES THAT INFORMATION IS TRUE TO THE BEST OF HIS/HER
KNOWLEDGE AND UNDERSTANDING. UNDER PAINS AND PENALTY OF PERJURY.

Jodie Justofin, Manager of Marketing & Events
(Signature)
Cambridge Health Alliance 617-503-3476
(Address) 52 Beacon St. 2nd fl. (Telephone Number)
Somerville, MA 02143

NOTICE - REGULATIONS

Section 12.08.010 Municipal Code
Section 1212.0 State Building Code

Encroachments onto Streets
Projecting Signs

1. A projecting sign shall be constructed wholly of incombustible materials.
2. All signs must meet requirements of Zoning Ordinances and Building Code.

Approved as to Building Code [Signature] 4/19/00
(Building Inspector) (Date)

Approved as to Zoning Ordinances [Signature] 4/19/00
(Date)

Temporary



CITY OF CAMBRIDGE

INSPECTIONAL SERVICES DEPARTMENT CITY HALL
CAMBRIDGE, MASSACHUSETTS 02139 (617) 498-9013

Robert R. Bersani

Commissioner

To Whom It May Concern:

As owner or agent of City of Cambridge, Cambridge, Massachusetts:

I do hereby declare my disapproval _____ approval ✓ of the installment of:

Canopy over the sidewalk entrance: _____

Awnings over the windows: _____

Projecting sign: _____

of said property.

Signed: Robert R. Bersani Date: 4/19/00

Address: 795 Mass. Ave. City Hall

Reply is requested within seven (7) days of date of this letter.



CITY OF CAMBRIDGE

INSPECTIONAL SERVICES DEPARTMENT CITY HALL
CAMBRIDGE, MASSACHUSETTS 02139 (617) 498-9013

Robert R. Bersani

Commissioner

To Whom It May Concern:

As owner or agent of CAMBRIDGE FAMILY YMCA, Cambridge, Massachusetts
I do hereby declare my disapproval _____ approval _____ of the installment of:

Canopy over the sidewalk entrance: _____

Awnings over the windows: _____

Projecting sign: _____

of said property.

Signed: [Signature] Date: 4/19/00

Address: 820 MASSACHUSETTS AVENUE CAMBRIDGE MA 02139

Reply is requested within seven (7) days of date of this letter.

← 20' →

3' ↓



5K Fun Run/Walk & Healthfest

Run for your Life!

Sunday, May 21st, 2000

10am-2pm Healthfest at the Cambridge & Somerville Hospitals

12-Noon Fun Run/Walk at the Line St. Lot in Cambridge



Cambridge Health Alliance
A COMMUNITY OF CARING

CHOATE
HALL &
STEWART



W WALLACE

Gilbane



CAMBRIDGE CHILDREN'S HOSPITAL

ARCADE



WALLACE WALLACE & ASSOCIATES, INC.

Hanger

← 20' →



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A COMMUNITY OF CARING

CHOATE
HALL &
STEWART



W WALLACE

Gilbane



CAMBRIDGE CHEMUNEX

AIRCAST



WINDYBELL

Hanger



Cambridge Health Alliance

1493 Cambridge Street • Cambridge, MA 02139 • 617.665.2300

April 18, 2000

Cambridge City Council
795 Massachusetts Avenue
Cambridge, MA 02139

Attn: Margaret Drury, City Clerk

Dear City Council,

The Cambridge Health Alliance has applied for a permit to hang banners across Massachusetts Avenue (at City Hall) and across Line Street (at The Cambridge Hospital) from May 6 through May 21, 2000. These banners are to advertise for our RUN FOR YOUR LIFE! event which will be occurring on Sunday, May 21, 2000.

The Cambridge Health Alliance will assume full liability in the event of personal injury or property damage resulting from any failure of the banner.

Sincerely,

John G. O'Brien
Chief Executive Officer

cc: Edward McCarthy
Cambridge Health Alliance Attorney



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with
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Medical
School

Applications and Petitions #5 494

An application was received from the Cambridge Health Alliance requesting permission to hang two banners across Line Street and Cambridge Street intersection and across Massachusetts Avenue, Central Square, in front of City Hall to advertise for their RUN FOR YOUR LIFE event. Approval was received from Inspectional Services Department.

In City Council April 24, 2000

ORDER ADOPTED