

2009 Run/Walk REGISTRATION FORM

Last Name: _____

First Name: _____

Address: _____

City: _____ State: _____

ZIP: _____

Phone: _____

Alt Phone: _____

Email: _____

Age on 8/15/09: _____ Male Female

Organization running/walking with
(if applicable) _____

Please mark all that apply:

- 5k Run \$ _____
- 5k Walk \$ _____
- I raised additional money \$ _____
- I am unable to walk. Here is my donation of \$ _____.

Please make checks payable to
Community Ministry 2009 Run/Walk.

- T-shirt size (please circle preferred size)
YS YM YL S M L XL XXL
- I have a T-shirt from a previous year and do not need a new one. Thanks!

Release of Liability

(please read and sign)

I understand that running and walking is a rigorous activity and I assume all risk for injuries or damages to me that may occur as a result of my participation in the Community Ministry Run/Walk. In consideration of being registered as an entrant and allowed to participate in this event, I hereby, for myself and my heirs, executors and administrators, release and discharge Community Ministry, their respective employees, trustees, officers, agents, volunteers, independent contractors and officials from all claims, damages and rights of action, present and future, that may arise out of or be incident to the Community Ministry Run/Walk. I certify that I am physically fit, and that on the day of the event I will participate in the Run/Walk only if I am physically fit and have adequately trained to do so.

I have read and understand the participant liability agreement.

Participant's Signature: _____

Date _____

Parent's/Guardian's signature if participant is under 18 years of age:

I grant permission for the use of my name and/or picture in any broadcast, photograph, print publication, website, video or other accounts of the Community Ministry Run/Walk.

Participant's Signature: _____

Date _____

Parent's/Guardian's signature if Participant is under 18 years of age:

Pledge Form

In addition to your registration fee we encourage you to raise additional money through pledges and involved others that are unable to walk or run themselves. Please use this form, which may be copied. You may send in one check for the entire amount pledged or the individual donations themselves. Please enclose it with your registration if possible. If all of the pledges are not collected when you register, please bring them in on the event day. Thanks!

Name _____ Address _____ Phone _____ email _____ \$ _____ Pd _____
