REGISTRATION FORM

ORGANIZATION NAME

LIONS CLUB NAME

PARTICIPANTS NAME _____ PHONE _____

Address _____ City _____ State _____

RUNNERS CATEGORIES, CIRCLE TWO > Male Female Under 20 21~35 36~50 51~65 66~75 75 +

SAFETY WAIVER / DISCLAIMER

I, the undersigned for myself, my heirs, executors, administrators and assigns, do hereby release, and discharge the Lions of District 1-A, and any or all event sponsors and recipients from any and all claims, demand actions and/or causes of action of any kind for any Injuries or damage sustained by me arising out of my participation in this event including pre and post activities. Attest and verify that I am sufficiently physically fit to participate in this event and that I have no condition that prevents me from safely participating herein. I understand that the Lions of District 1-A, the event sponsors, and/or news organizations may photograph and videotape images containing my likeness which will be the sole property of the photographer and the Lions of District 1-A. I here-by authorize the Lions of District 1-A, the events sponsors, and/or news organizations covering this event to use or publish said images containing my likeness in the news accounts, for publicity, in promotional material, and for any other lawful purpose.

PRINT NAME X_____ SIGN NAME X_____

☐ RUNNER NUMBER ASSIGNED _____ ☐ WALKER

FEE* > *Walkers $ 20.00* ~ *Runners $ 30.00* ~ *NO FEE With $ 50.00 In Donations

NAME	ADDRESS - City - State – Zip	Fee or Donation $

PLEASE MAKE CHECKS PAYABLE TO DISTRICT 1 A LIONS

SUB TOTAL $ _____

FEE $ _____

DONATION TOTAL $ _____

SIGNED _____

SUNDAY APRIL 29th 2018