

7th Annual Walker Pump and Run – March 31, 2012
Registration Form

Name: _____

Gender: M F

Age: _____

Shirt Size: S M L XL

Address: _____
Street City State Zip

Phone: _____ E-mail: _____

Emergency Contact / Phone: _____

Waiver

Directions: If 18 year of age or older, the waiver must be signed by the participant. If under 18 years of age, the waiver must be signed by a parent or legal guardian of the participant, acting on their behalf.

Walker Ice & Fitness Center is hereby relieved of any and all responsibility for injuries sustained by the participant. Any and all claims against Walker Ice & Fitness Center precipitated by any such injuries are hereby waived. Should injuries be incurred, permission is granted to Walker Ice & Fitness Center to obtain any necessary medical and emergency services for the participant, at the expense of the undersigned. Exclusive rights to take and release photographs and video of the participant are granted to Walker Ice & Fitness Center for use in advertising and promotional purposes.

Signature

Date

Name of Parent or Legal Guardian (if applicable)

\$30 through March 15th | \$35 March 16th-30th | \$40 day of event

Please mail, e-mail, or fax your registration form and payment to:

Walker Ice & Fitness Center
Attn: Megan Streeter
4151 Remembrance Rd NW
Walker, MI 49534

E-mail: mstreeter@walkericeandfitness.com
Fax: (616) 735-6290
Phone: (616) 735-6286

Make checks payable to: Walker Ice & Fitness Center

Credit Card Type: Visa MasterCard

Account Number: _____

Exp. Date: _____