

Polio Plus Walk Registration

Produced by MTR Charities, Inc. & Mission Trail Rotary Club

Terms and Conditions:

I fully realize the dangers of collision with pedestrians, vehicles, bike riders, and fixed or moving objects; the dangers arising from surface hazards, and weather conditions; and the possibility of serious physical and/or mental trauma, injury or even death associated with cycling/walking events. **This is a "Rain or Shine" event and no refunds.**

I hereby waive, release, and discharge for myself, my heirs, my executors, administrators, legal representatives, assigns and successors in interest (herein after collectively "successors") any and all events, the promoter, the San Antonio Mission Trail Rotary Club, and any promoting organization's property owners, law enforcement agencies and all public entities through or by which the events will be held for any and all damages which may be sustained by me directly or indirectly in connection with, or rising out of, my participation in or association with the event or travel to or return from the event

I agree it is my sole responsibility to be familiar with the course, the rules and special regulations for the event. I understand and agree that situations may arise during the ride which may be beyond the immediate control of the ride officials or organizers, and I must continually ride so as to neither endanger myself or others. I accept responsibility for the condition and adequacy of my equipment. I have no physical or medical condition which to my knowledge would endanger myself or other as I participate in this event. I agree, for myself and successors, that the above representations are contractually binding and are not mere recitals and that I should, or my successors shall, be liable for all expenses (including legal fees) incurred by other party or parties in defending, unless the party or parties are finally adjudged liable on such claim for willful and wanton negligence. This agreement shall not be modified orally, and a waiver of any provision shall not be construed as a modification of any other provisions herein. The Mission Trail Rotary Club event, sponsors, and/or their agents shall be permitted to use photography and records of this event for any purpose. **All registered riders must wear safety approved bicycle helmets. Riders and walkers must follow all State and local traffic laws.**

Registration Packets/T's to be picked up on-site Saturday, December 6, 2008

Mission County Park #1 * 6030 Padre Drive, San Antonio, TX 78214 * 8:30 – 9:30 AM

Polio Plus Walk begins at 10:00 AM.

Information

2008 Polio Plus Walk Registration

<p>Name _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Phone () _____ E-mail _____</p> <p>Age () Parent/Guardian Signature required if under 18</p> <p>I have read and I agree to the terms and conditions for this Polio Plus Walk</p> <p>Signature/Date _____ / _____</p> <p>I acknowledge that my child, is participating in this event. I also authorize the medical treatment for any injuries during this event. I as a parent or guardian of the above named minor hereby give my permission for my child or ward, to ride according to the Terms and Conditions above.</p> <p>Parent Signature _____ / _____</p> <p>Circle Shirt Size [S] [M] [L] [XL] [XXL]</p> <p>Circle Event [Polio +Walk] [Bike Tour – 12 mi]</p> <p>Group Leaders: Collect & verify individual forms for each participant.</p> <p>Check-in: Dec 8- 8:30 AM Mission County Park #1 6030 Padre Drive, San Antonio, TX 78214</p>	<p>Organization: _____</p> <p>Rotary Club/Member # _____ Individual Registration Form Required for Each Participant</p> <hr/> <p><input type="checkbox"/> My registration fee included in the single donation for the organization above.</p> <p><input type="checkbox"/> My registration fee is attached to this form and should be credited to the organization above.</p> <p><input type="checkbox"/> I have included a personal donation to TRF Polio Plus Walk, but do not wish to register.</p> <p>* Individual Pre-Registration Fee @ \$25 Registration Fee @ \$30</p> <p>* Pre-Registration received by November 24th</p> <p>Enclosed is my check or donation \$ _____</p> <p>Check # _____</p> <p>Checks Payable to: MTR Charities, Inc.</p> <p>Questions: Richard Warren <rlwarren44@sbcglobal.net ></p>
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