

5K COMMUNITY WALK for Children & Families

Saturday, MAY 7th, 2016

9:00am-12:00noon

(Check-in begins at 8:00am)

Proceeds support The Children's Home Summer Camp Program

Use the form below!

**Make checks payable to: *The Children's Home*, or use the Credit Card form below.
Corporate and Organization Sponsorship are available.

Unleash Your Awesome!

Please download and complete!

Registration Form - 5K Community Walk for Children & Families

Name _____

Address _____

City/State/Zip _____

Phone # _____ Age on day of walk _____

Email _____

Today's Date _____ Circle One: Male Female

Please check all that apply:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Individual Walker | \$30 pre-registration |
| <input type="checkbox"/> Individual Walker | \$35 day-of-walk |
| <input type="checkbox"/> *Team Member | \$25 per walker (5 or more walkers) |
| <input type="checkbox"/> "I wish I could be there" Sponsor | \$50 contribution |

MAIL OR FAX TO:

**The Children's Home
c/o Community Walk
205 Bloomsbury Ave.
Catonsville, MD 21228
Phone # 410-744-7310
Fax: 410-455-0071**

**T-Shirt Size
(circle)**

S M L XL

Other Size _____

WAIVER - Must be signed by all entrants!

I, for myself and anyone entitled to act on my behalf, waive and release The Children's Home, Inc., all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the 2016 5K Community Walk. I further grant permission to The Children's Home, Inc. and/or agents authorized by them to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any purpose.

*Team Name and Team Leaders Name _____

Credit Card Payment (circle) MC Visa AMEX Security Code # _____

Card # _____ Exp. Date _____

Name on Credit Card _____

Signature (Credit Card Approval) _____

Signature of Participant

Date

(Parent or guardian signature if under 18)

Emergency Phone Number