## WALK FOR WUMCO

Whalen Commons, Poolesville, MD October 21, 2017, 12:00 noon (Check in at 11:30 am) Registration Form

Please complete this form in its entirety. Please use one form per walker.

Last Name	First Nar	First Name	
Address			<del></del>
City	State	Zip	
E-mail			
Phone			
Walker or Guardian Signature (R I have full knowledge of the risks involved (the "Event"). I agree to assume all risk and entities involved with this Event from participation in this Event. I understand the coordination of this Event makes at trails that will be used for the Event, and parks, streets, or trails, or for the public myself or others. I hereby grant WUMO related to this or future fundraising even likeness, voice, portrait, testimonial state thereto, in all media and promotion of N	red with, and understand that I is of such injury. I unconditional im any and all claims, damages I that neither WUMCO Help not representations or warrantied I agree that none of those passafety thereon. I hereby certify O Help and the walk sponsors ints, and without compensation tement, if any, and to refer to not so the such that I will be that I will be the such that I will be the suc	Ily release and discharge Was, and expenses that may an any of the other sponsors, a about the fitness or conditaties is responsible for the ray that I am able to participat the irrevocable right to use, any photographs, video responsible for the responsible for the responsible for the responsible for the responsible right to use.	'UMCO Help and all other persons rise directly or indirectly from my individuals, or groups involved in tion of the public parks, streets, or naintenance or condition of those e in this Event without harm to and publish, for any purpose cordings, or motion pictures of my
anoroto, in all modia and promotion of t	volvide floip of the event.	Date	
Signature of Walker (parent/guar	dian if under 18 years of a		<del></del>
Payment Information			
My registration fee is:	\$10 (youth, age 18 an	d younger)	_ \$15 (adult)
	\$40 (family)		
I am registering with the PES rur	nning club:		
Additional Donation Amount (check	cone) \$50 \$100	Other: Please specify: \$	S
Payment Method Ch	eck ( <i>Made out to WUMCO</i>	Help)	_Cash
If registering by mail, please mai	Ito: WUMCO Walk Attn: Catherine PO Box 247 Poolesville, MI	e Beliveau	
(This section for use by Walk Of	icials)		
Total Received: Rec	eived By:		
Youth Participants: Wristband received	PES Running C	Club participants: Token giv	en

One-hundred percent of all walker registration fees and donations go directly to WUMCO Help, which provides services to people who are at risk for becoming homeless. Your registration fee and any additional donation(s) are fully tax-deductible, pursuant to Sec. 501(c)(3) of the Internal Revenue Code, as the donor receives no goods or services in return.