Name	
Address	
City and zip	
Phone	
Email	
<b>To participate in Ride, Walk or Run for Life please complete and sign waiver</b> Preregistration by mail or register on-site: ( <i>Registration is free - \$20 donation per t-</i>	
Adult T-Shirt Size (Please circle one): Small Medium Large	Extra Large
Emergency Contact with Phone #:	
Gender: Male Female Amt. Enclosed	
I hereby wish to participate in the activity named above and any related events, acticonsideration of participating in the activity or activities indicated above, I hereby, fexecutors, administrators, and assigns, do hereby forever release, waive, and relimated have because of my participation. Furthermore, I promise not to sue the Rig County or any of its officers, volunteers, or agents for actions or omissions arising such activities, and to indemnify and hold the Right to Life Society of Clark Countries or damages incurred by the Society because of my participation in such activities.	or myself and for all heirs, nquish all claims I have or ht to Life Society of Clarking from or connected with ty, Inc. harmless from any
I hereby grant full permission to all the foregoing to use my name and likeness in any broadcas media reporting or advertising of the Event without compensation.	st, telecast, video or print
Signature Date	

Return to: Clark County Right to Life, 815 West Main Street Springfield, Ohio 45504