



Soroptimist International of Albany

Web site: www.sialbany.org

Phone: 541 812-5888

Walk for the Cause/Run for a Life

October 2, 2010

INDIVIDUAL REGISTRATION

Register today at www.sialbany.org or complete this form and mail it with your check to SI Albany, PO Box 1475, Albany, OR 97321. Registration fee is \$20. A tee shirt is an additional \$10. Register before **September 10** in order to be guaranteed a tee shirt. Registration can be made on event day between 8 and 9 a.m. at the Albany City Hall courtyard, across the street from the Linn County Courthouse. Pre-registration is recommended. Everyone is encouraged to collect pledges for this worthy cause—every penny helps!

Print Name: _____

Phone No.: _____

Mailing Address: _____

E-mail Address: _____

City, State, Zip: _____

RELEASE—MUST BE SIGNED BY PARTICIPANT OR LEGAL GUARDIAN IF PARTICIPANT IS UNDER 18. In consideration of the acceptance of registration and for being permitted to participate in this event, I hereby assume full and complete responsibility for any injury, damage, or accident which may occur during my participation in this event or while on the premises of this event. I hereby **RELEASE, ACQUIT and FOREVER DISCHARGE and HOLD HARMLESS** Soroptimist International of Albany, its affiliated individuals, any event sponsors, including any of its parties, agents, or employees, successors and assigns from any and all claims, demands, damages, costs, attorney's fees, liabilities and claims of any nature arising from or in any way connected with a Walk for the Cause/Run for a Life. By my signature I hereby signify that I have read and agree to terms of **RELEASE**.

Signature: _____

Date: _____

Walker Runner Female Male

RUNNERS, please complete the following information: Medals will be awarded to the first place male and female finishers in each age category. Timing will be standard gun start, provided by Eclectic Edge Events.

Indicate age group: 15-19 20-24 25-39 40-44

45-49 50-54 55-59 60-64 65+

Bib Number: (To be assigned)

FEES: Registration fee is \$20. Tee Shirt Fee is \$10.

Adult Shirt Sizes: Small, Medium, Large, X-Large, XX-Large, XXX-Large

Child Shirt Sizes: XS (2-4) S (6-8) M (10-12) L (14-16) XL (18-20)

Are you a breast cancer survivor? Yes No

Breast cancer survivor shirts have "Survivor" printed on the shirt sleeve.

Registration:	\$20 each	\$ _____
Tee Size: _____	\$10 each	\$ _____
TOTAL FEES:		\$ _____

PLEDGE FORM		Pledge Amount
Name	Donor's Name	
_____	1. My personal pledge	\$ _____
_____	2. _____	\$ _____
_____	3. _____	\$ _____
_____	4. _____	\$ _____
_____	5. _____	\$ _____
_____	6. _____	\$ _____
_____	7. _____	\$ _____
_____	8. _____	\$ _____
_____	9. _____	\$ _____
_____	10. _____	\$ _____
_____	11. _____	\$ _____
_____	12. _____	\$ _____
_____	13. _____	\$ _____
_____	14. _____	\$ _____
_____	15. _____	\$ _____
TOTAL		\$ _____

Receipts will be issued for individual contributions of \$250 or more. SI Albany is a 501 (c) 3 organization.
Federal Tax ID No. 93-0957752
Group Exemption No. 3899

Make checks payable to: **SI Albany.**