



What will you walk for?

Walk **FOR** Wishes®

October 24, 2009

at

Carowinds

Registration Form

Register online at <http://walkforwishescharlotte.kintera.org> or submit the commitment form by mail or fax.

Participant's Name: _____

Team Name: _____

Each walker age five years and older should complete a separate form

Address: _____

City: _____ State: _____ Zip Code: _____

Total Pledge Goal: _____ T-shirt size*: _____

**For walkers raising \$25 or more. Sizes based on availability and available in Adult S/M/L/XL/XXL and Child S/M/L.*

Phone: _____ E-mail: _____

Waiver: In consideration of being permitted to participate in the Walk For Wishes®, I hereby for myself, my heirs and personal representatives assume any and all risks which might be associated with the event. I further waive, release, discharge, and covenant not to sue the Make-A-Wish Foundation® of Central and Western North Carolina, their offices, employees, sponsors, organizers, volunteers or other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities. The contribution benefiting the Make-A-Wish® Walk For Wishes shall not be subject to any donor restrictions. I also agree to the use of any photo, film, or videotape of the event for any purpose.

Participant Signature: _____

Printed Name: _____

Date: _____

Thank You!



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