



Registration and Release Form

Trot to Adopt December 5th 2020
10am at Blanchard Woods Park
www.TrotToAdopt.org

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____)____-____ Email: _____

Age: _____ Birth Date: ____/____/____ Gender: Male / Female

Family you are sponsoring: Please check one

- Davids Martin Pharaoh Reckart
 Project 143 5-way split of the \$30

Check one:

- 5K (\$30 per participant)
 1 mile Family Walk/Run (\$30 per family) # of children in family _____

Payment Method: Cash Credit Check # _____ Total amount paid: \$ _____

Payment Notes:

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Waiver / Release Form

I, _____, hereby waive all claims against the "Trot to Adopt" personnel, sponsors, Project 143, and Blanchard Woods Park for any injury that may occur during the event. I attest that I am physically able and prepared for this event. I pledge to bring all sponsorship dollars raised on the morning of the "Trot to Adopt," Dec 5, 2020, rain or shine.

Print Name: _____ **Date:** ____/____/____

Signature: _____