Super Sunday Hope Walk/5K
February 6, 2011

SUPER SUNDAY MORNING

HOPE WALK

5K WALK & FUN RUN

★SUNDANCE SQUARE★

FORT WORTH • TEXAS

SUPER BOWL SUNDAY

FEBRUARY 6 • 2011

Entry Fees:

Early.....Before 12/31..... $25..... $_____

General.....After 1/1.....$35..... $_____

Packet Pick-Up..Feb. 3rd, 4th, 5th....$40.....$_____

Mail My Shirt.....$5..... $_____

Entry must be received by Jan. 14th for mail option

I would like to donate..... $_____

TOTAL.....$_____

Packet Pick-Up February 3rd, 4th, 5th

Norris Center, 304 Houston Street, Fort Worth, TX

Entry Form MUST be signed below - Make check payable to:

Mail Completed Form By Jan. 31st to

Hope Walk
2807 Allen St., PMB 629
Dallas, TX 75204

How did you hear about The Hope Walk?

❑ Print Advertisement ❑ Radio ❑ TV

❑ Email ❑ Other_____

Last Name

First Name

E-mail Address

Mailing Address

City

State

Zip Code

Home Phone

Work Phone

Cell Phone

Age

Date of Birth (M M D D Y Y)

Gender (M F)

T-shirt size (YL S M L XL 2XL 3XL)

WAIVER - MUST BE SIGNED

I AGREE THAT ANY AND ALL REPRESENTATIONS MADE AND RELEASES, WAIVERS, COVENANTS, CONSENTS AND PERMISSIONS GIVEN BY ME HERE UNDER ARE GIVEN ON BEHALF OF ME AND ANY AND ALL OF MY MINOR CHILDREN OR PERSONS OVER WHOM I HAVE GUARDIANSHIP PARTICIPATING IN OR ATTENDING THE EVENT. I UNDERSTAND THAT MY CONSENT TO THESE PROVISIONS IS GIVEN IN CONSIDERATION FOR BEING PERMITTED TO PARTICIPATE IN THIS EVENT. I AM A VOLUNTARY PARTICIPANT IN THIS EVENT. I AM IN GOOD PHYSICAL CONDITION AND AM SOLELY RESPONSIBLE FOR MY PERSONAL HEALTH, SAFETY AND PERSONAL PROPERTY. I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT THAT MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE EVENT PREMISES. TO THE FULLEST EXTENT OF THE LAW, I, HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST THE HOPE WALK FOUNDATION AND THEIR RESPECTIVE DIRECTORS, OFFICERS, VOLUNTEERS, AGENTS AND EMPLOYEES; ANY EVENT SPONSORS; AND ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT, FOR ANY INJURY OR DAMAGES I MIGHT SUFFER WHILE PARTICIPATING IN THIS EVENT. THIS RELEASE APPLIES TO ANY AND ALL LOSSES, LIABILITIES, OR CLAIMS I MAY HAVE ARISING OUT OF MY PARTICIPATION, INCLUDING BUT NOT LIMITED TO, PERSONAL INJURY OR DAMAGE SUFFERED BY ME, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY FALLS, CONTACT WITH AND /OR THE ACTIONS OF OTHER PARTICIPANTS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS RELEASE, AND HAVE SIGNED IT VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARTICIPANT'S NAME

SIGNATURE Signature of Parent or Legal Guardian if Participant is under 18 years of age is required.

DATE