



## 4th Annual Rotary Lights Run/Walk

Sunday, December 12, 2010

4:00 p.m. | Riverside Park

### Registration Form

Name:					
Address:					
City:		State:		Zip:	
Phone:		Email:			
Gender:	M	F	Age:		

### Quick Family Registration

Name:		Gender:	M	F	Age:	
Name:		Gender:	M	F	Age:	
Name:		Gender:	M	F	Age:	
Name:		Gender:	M	F	Age:	

Registration Fee: \$10 per person, \$27 maximum per family

Amount enclosed: \$ \_\_\_\_\_

Make checks payable to: Rotary Lights

Return forms and direct questions to:

**Rotary Lights**

PO Box 215

La Crosse WI 54602-0215

608.784.9993

[www.rotarylightsrun.org](http://www.rotarylightsrun.org)

I in full recognition and appreciation of the hazards and exposures involved, do hereby voluntarily agree to assume all the risks and responsibilities involving my voluntary participation in the Rotary Lights Run/Walk scheduled on Sunday, December 12, 2010. I do for my child, myself, my heirs, and personal representative(s) hereby defend, hold harmless, indemnify and release and forever discharge the Rotary Lights and all of its officers, volunteers, event sponsors against any and all claims, demands, and actions or causes of action of any sort on account of damage of personal property, or personal injury, or death which may result in my participation. I also hereby grant the Rotary Lights permission to utilize my likeness for use by television, films, or printed media to further the aims of the program and release them from any/all claims in its use. I confirm that I have health and accident insurance in effect for the inclusive dates of my participation and no such coverage is provided for me by Rotary Lights. I have read and executed this document with full knowledge of its significance. I have read and agree to the above.

Printed Name Participant/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Initials (acknowledgement of waiver): \_\_\_\_\_