**Mail Form & Fees To:**

Susan G. Komen Memorial
Attn: Peoria Walk
4700 N. University St., Suite 91
Peoria, IL 61614-5849

**ADULT T-SHIRT SIZE**

- SMALL
- MEDIUM
- LARGE
- XLARGE
- 2XLARGE
- 3XLARGE

**CHILDREN’S T-SHIRT SIZE**

- XSMALL (2-4)
- SMALL (6-8)
- MEDIUM (10-12)
- LARGE (14-16)

I Agree that any and all representations made and releases, waivers, covenants, consents and permissions given by me hereunder 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 give my consent and permission to the Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G. Komen (“Komen”), its affiliates and Walks, their sponsors and corporate sponsors, their successors, assigns, and assigns the irrevocable right to use, for any purpose whatsoever and without compensation, any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event (the “Event”), and (i) the results of my participation in this Event (e.g., Walk time, name, participant number).

I understand that (i) my consent to these provisions is given in consideration for being permitted to participate in this Event; (ii) I may be removed from this competition if I do not follow all the rules of this Event; and (iii) 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 know that this Event is a potentially hazardous activity and 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 (including, but not limited to, my fundraising activities associated with the event), or while on the event premises (collectively, my participation). To the fullest extent of the law, I, for myself, my next of kin, my heirs, administrators, and executors (collectively, “releasors”), hereby release and hold harmless and covenant not to sue against Komen, the Peoria Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Memorial Affiliate of Susan G. Komen for the Cure and all other Komen affiliates and their respective directors, officers, volunteers, agents and employees (I, any event sponsors, and II all other persons or entities associated with this event (collectively, the “releasors”) for any injury or damages I might suffer in connection with my participation. This release applies to any and all loss, liability, claims or my releasors may have arising out of my participation, including but not limited to, personal injury or damage suffered by me or others, whether such losses, liabilities, or claims be caused by falls, contact with and/or the actions of other participants, contact with fixed or non-fixed objects, contact with animals, conditions of the event premises, negligence of the releasors, risks not known to me or not reasonably foreseeable at this time or otherwise.

I understand that I am solely responsible and liable for all aspects of my fundraising activities associated with my participation, including, but not limited to, the safe and lawful conduct of any fundraising activities.

This photographic and results release and waiver and release of claims (collectively, the “Release”) shall be construed under the laws of the state in which the event is held. In the event any provision of this Release is deemed unenforceable by law, (i) Komen shall have the right to modify such provision to the extent necessary to be deemed enforceable; and (ii) all other provisions of this Release shall remain in full force and effect.

I understand that I have given up substantial rights by signing this Release, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent allowed by law.

Regardless of age, all individuals on the walk site must be registered.

**Research**

**Care**

**Community**

**Action**

**PLEASE READ & SIGN BELOW PHOTOGRAPHIC AND RESULTS RELEASE and WAIVER and RELEASE OF CLAIMS**

**I understand that I am solely responsible and liable for all aspects of my fundraising activities associated with my participation, including, but not limited to, the safe and lawful conduct of any fundraising activities.**

**For Office Use Only!**

Data Entry Completed By: ____________________________

Cash by: ____________________________

Payment Received: ____________________________

Credit by: ____________________________

Check by: ____________________________

Total Amount $ ____________________________

Cancellation: This event occurs rain or shine. We reserve the right to cancel in extreme circumstances. In that event, there will be no refunds. All funds collected benefit Komen Memorial.