



2nd Annual ALLY'S RUN



Saturday, June 11, 2011 at 8am

Help Ride To Walk by collecting donations to help children with disabilities and benefit the Ally Memorial Scholarship Fund.

Clip and mail back this portion with payment

Entry Application and Release

\$30 if postmarked by June 4, 2011 \$40 after June 4th including Race Day

Name _____ Email _____

Address _____ City _____ Zip _____

Phone _____ Male _____ Female _____ Age _____

RACE (circle one): 5K 10K Shirt Size (circle one) S M L XL XXL

LIABILITY RELEASE: I am aware that outdoor recreational activities can be hazardous. I assume all risks of injury, loss of life and damage to persons and property during such activity, fully realizing that Ride To Walk, or its agents, employees, successors and assigns are held harmless from all liabilities, claims, demands, costs, losses, expenses, or compensation of whatever nature of loss, damage, or injuries to persons and property sustained by me, my heirs, personal representatives, successors and assigns and all other persons, resulting from or in any way connected with transporting or use of equipment furnished by Ride To Walk or its agents whether directly or indirectly caused or contributed to said injury, loss of life or damage to persons or property by their negligent acts, gross negligence or recklessness. I further agree to reimburse Ride To Walk for all court costs and attorney fees in defending an action. I make this agreement to induce Ride To Walk to allow me to participate in this activity. I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that at this event I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and/or assigns. This waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document and I understand its content.

Signature of Entrant _____ Date _____

(if under 18, parent must sign)

Make checks payable to: *Ride To Walk* PO Box 1354 Lincoln, CA 95648 (916) 434-0693
(501c3 charitable contribution)