

REGISTRATION FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Sex: M / F Date of Birth: ____/____/____

All Participants must be 21 Years old by 7/29/19

WAIVER AND RELEASE OF LIABILITY In consideration of the furtherance of your purpose, objectives & work, & in consideration of you permitting me to participate in Robbie's 5K Run, on behalf of myself & my heirs, I hereby voluntarily, knowing, & with express intention of doing so, release & waive any & all rights & claims known & unknown, which I may have against Ronald McDonald House of Providence & Grampy's Charities, as well as any other person or groups connected with this event, their heirs, assigns & successors, for any & all injuries or images which I may suffer while taking part in this event. Additionally, I waive any right to bring suit or action against RMH & Grampy's Charities & their employees as well as other persons, or groups connected with this event, for any & all of the aforesaid injuries.

I, the undersigned, give my general consent to RMH & Grampy's Charities to take, reproduce & use, as described below, photographs or videotapes of me for use by RMH & Grampy's Charities. I understand that the photos or tapes may be taken only with the consent of RMH & Grampy's Charities during the event to be held on 7/29/19, for the benefit of RMH & Grampy's Charities within or outside the agency, or any other use deemed suitable by RMH & Grampy's Charities. I hereby release & agree to hold harmless RMH & Grampy's Charities and their duly authorized agents for all legal responsibility for the use of photography or tapes as authorized herein.

Your Signature: _____ Date: _____

Grampy's Charities is a 501 (C) 3 non-profit organization Federal Tax ID # 20-0523402

Please send payments to: Grampy's Charities, 261 Ledyard Street, New London, CT 06320

	SPONSOR'S NAME	ADDRESS or E-MAIL	\$ AMOUNT PAID
1			
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15			
	TOTAL		

Registration Fee: Raise \$500 or more by 7/29/19. Fee Includes - Race, Gala, T-shirt & Bag. Payable by check, cash or credit card at the event or collect pledges online at grampys.org Make all checks payable to: Grampy's Charities. Ask your sponsors to write your name on the bottom left corner of the check. Make as many copies of this form as needed. Questions? Please contact Jim Castle (860) 235-6973.