

Lowcountry Down Syndrome Society BUDDY WALK REGISTRATION

Please complete this form and mail, with a check payable to **LOWCOUNTRY DOWN SYNDROME SOCIETY**, to: 322 St. John's Road, Guyton, Ga. 31312- before October 2, 2018. Registrations will also be accepted on the day of the event (October 6, 2018).



Walker's Name _____
 Company/Team Name _____
 Street Address _____
 City _____ State _____ Zip _____
 Phone _____ E-Mail _____

Walk Begins at 10:00 AM
 on October 6, 2018
 in
FORSYTH PARK!!

- Adult/Child Registration - \$ 15.00 per person
- Family Registration (Up to 2 parents & 2 children) - \$50.00
 - Additional Children 18 and Under - \$8.00 (after Family Registration)

All registration fees include *Buddy Walk T-shirt for each walker, Meal Bracelet, and access to all of the day's events.* Please list the name of each walker and place an "X" under the t-shirt size.

Name of Walker	Youth XS	Youth S	Youth M	Youth L	Adult S	Adult M	Adult L	Adult XL	Adult XXL	Adult XXXL

- I cannot participate in the walk, but please accept my donation to support inclusion and acceptance of people with Down syndrome:
 - \$10 \$20 \$50 Other _____

Would you like to become a member of LDSS? (circle one) yes no

What is your interest in LDSS? _____

Waiver: In consideration of me and/or my minor child being permitted to participate in the Buddy Walk, I hereby—for myself, my heirs and personal representatives—assume any and all risks which might be associated with the event. I further waive, release, discharge and covenant not to sue *Lowcountry Down Syndrome Society*, its officers, employees, sponsors, organizers, volunteers or other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered by myself and/or my minor child as a result of taking part in the events and any related activities. I also authorize the use by *Lowcountry Down Syndrome Society* of any photo, film or videotape taken of me or my minor child at the event for any purpose.

1st Adult
Signature _____

2nd Adult Signature
(if applicable) _____

Date _____

THIS REGISTRATION IS NOT VALID UNLESS SIGNED.