

MOVING TOWARDS A CURE '09!

September 26, 2009 – Coachman Park, Clearwater, FL



REGISTRANT INFORMATION								
Last Name			First			M.I.	Date	
Street Address						Apartment/Unit #		
City			State			ZIP		
Phone			E-mail Address					
<p>Circle ONE Event – Please choose which event you would like to participate in</p> <p>100k Cycling \$35 - after 9/ 11/09 \$40 50K Cycling \$35 – after 9/11/09 \$40 25k Cycling \$25 - after 9/ 11/09 \$30</p> <p>5k Chip Timed Run \$25 - after 9/ 11/09 \$30 5k Walk \$25 - after 9/11/09 \$30 1m Family Fun Walk/Run \$15 - after 9/ 11/09 \$20</p> <p>Virtual Participant \$15 (for those who would like to attend, but are unable. You can be with us virtually. You will still receive your event T-Shirt, can create a fundraising page and qualify for fundraising prizes)</p>								
Gender			Birth Date					
Circle Shirt Size:	Youth Md	Youth Lg	Adult Sm	Adult Md	Adult Lg	Adult XL	Adult 2XL	Adult 3XL
Event T-Shirt -	We must receive your registration along with payment by 9/11/09 to guarantee that you receive an event T-Shirt. We will do our best to provide event T-Shirt to all participants that register after 9/11/09, these will only be available while quantities last and may not be in your size.							
Are you a Brain Tumor Survivor	YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, please visit our survivor table at the post-event celebration for your Survivor gift bag.			
Although fundraising is not mandatory, it is an important part of the event. We do encourage all participants to fundraise for the event. We have provided some great prizes for our fundraisers. Prize levels start at just \$100! Top fundraisers will be honored at the post event celebration. For a complete list of fundraising prizes or for information on how to start your own online fundraising page, see the event details at www.MilesFoHope.org – click on the event tab (top right of page) then "Moving Towards a Cure '09". Please contact us for questions regarding fundraising. For information and assistant with fundraising, information can be download by visiting http://www.MilesForHope.org/download								

I have included a donation in the amount of \$ _____

All donations are tax deductible

WAIVER

I realize that by signing below I acknowledge and agree that agree participation in Miles for Hope – Moving Towards a Cure '09! entails the risk of personal injury. Such risks may include, but are not restricted to slips, falls, physical contact with other people, equipment or facilities, later accidents or abnormal climatic conditions. I accept and assume all such risks, dangers and hazards and the possibility of personal injury, death, violence, property damage or loss, attendance and participation in activities provided by Miles for Hope. I accept my responsibility to abide by the laws of the country, to ensure that I have adequate medical coverage, protect personal possessions, and obey all the rules set out for athletic and recreation activities. I accept full responsibility for my level of participation and use of my equipment by exercising my judgment, based on my own experience and competence. In consideration of approval to participate in such activity, I and any personal representative, hold harmless, release and forever discharge Miles for Hope, their directors, officers, volunteers, agents, or trainees from any and all actions, causes of actions, claims, and demands for damages, loss or injury, resulting from or arising out of my participation in such activities. I also indemnify and save harmless Miles for Hope from any and all actions, causes of actions, demands, expenses or losses whatsoever which they may bear as a result of my participation in such activities, by reason of damage to any and all property and any and all personal injuries, including death of others or myself. I HAVE READ, UNDERSTAND AND ACCEPT ALL OF THE ABOVE; I CERTIFY THAT I AM AT LEAST 18 YEARS OF AGE. I AM NOT 18 YEARS OF AGE OR OLDER, MY PARENT OR LEGAL GUARDIAN HAS READ, UNDERSTAND AND ACCEPTS ALL OF THE ABOVE AND WILL BE SIGNING ON MY BEHALF.

Signature _____

Date _____

MAIL REGISTRATION FORM ALONG WITH A CHECK OR MONEY ORDER ALONG WITH ANY DONATIONS MADE OUT TO MILES FOR HOPE TO PO BOX 5292, CLEARWATER, FL 33758

Miles for Hope is a 501(c)(3) nonprofit, tax-exempt organization designated by the Internal Revenue Code. Our tax identification number is 26-3429074.

www.MilesForHope.org - Info@MilesForHope.org - 727-647-6548