Sunday, October 13, 2019
ROTARY WALKFEST
Walk To Support NJ Food Insecurities

Location: **Waterloo Historic Village Waterloo Road, ByramTwsp.**

Walker(s): _____ _____E-Mail: _____

Address:_____

Rotary Club/ Congregation/School/Organization: _____

_____

Make checks payable to: Rotary Walkfest 7470

	Donor's Name	Address/E-mail	City	Zip	Donation
1.					
2.					
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Registration Fee $ _____

Total Submitted at Check In $ _____

Cash $ _____ # Checks_____ $ _____

In consideration of your acceptance in WALFEST, I the undersigned, waive and release any and all the rights and claims for damages, and hold harmless any sponsoring organization and co-sponsors, their representatives, agents, and assigness for any and all injuries suffered by me in said walk. I hereby grant permission to WALKFEST and (Rotary District 7475) to use photos that may include myself for promotion and publicity purposes, and understand that if WALKFEST can not be held due to an act of God or circumstances beyond control, WALKFEST is not liable to refund any money paid by me to participate.

With my signature, I acknowledge that I have read and accept these terms under which my entry is made.

Signature_____ **Date**_____

(Parent or guardian if under 18 years)