



and the Mayor's Walk

A Health and Fitness Festival for Older Adults

**Tuesday
June 1, 2004
9 am to Noon**

Denver Botanic Gardens, 1005 York Street, Denver

Healthy living and maintaining a positive outlook in older years is the focus of this Health and Fitness Festival.

Mayor John Hickenlooper invites participants to enjoy Denver Botanic Gardens, active workshops, health screenings, massage and the fitness walk.

A \$10.00 charge includes admission, sessions, T-shirt and a snack pack.

RTD SeniorRide will provide transportation for groups of 10 or more at a cost of \$1.25 each. To reserve a bus call 303-299-6503 by May 1st.

Individual service provided by Bus Routes 10 & 24.

Activities: 9:00 AM - Noon

- Registration, coffee service
- Join the Mayor's Fitness Walk. One mile loop through the Gardens.
- Blood Pressure Checks
- Health Screenings, Spirometer and Electrical Impedance testing
- Stretch, the Stilt Walker
- Chair Massage with Heritage College
- T'ai Chi with the T'ai Chi Project
- Suz-Q-Z the clown
- Drumming – with Supreme Harmony Drummers
- 10,000 Steps with On the Move Colorado
- Osteoporosis and Arthritis speakers
- Pilates and Strength building demos



Registration

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

T-Shirt Size (Check one)

Small Medium Large XL

**ALL PARTICIPANTS MUST READ AND SIGN THE
WAIVER ON THE REVERSE SIDE OF THIS FORM**

REGISTRATION DEADLINE:

Friday, May 14, 2004

(late registrations may not receive t-shirts)

CHECK / MONEY ORDER FOR \$10.00

PAYABLE TO (\$15.00 at the gate):

LYLI (Living Younger Longer Institute)

DETACH FORM AND MAIL TO:

Montclair Recreation Center

Attn: Casey Howshar

729 Ulster Way

Denver, CO 80230

For more information call Casey at 303-364-8607

or visit www.taichidenver.com

IN RETURN for being allowed to participate in the "SPRING INTO HEALTH" conference, the undersigned for himself or herself, his/her heirs, assigns and legal representatives, hereby expressly agrees to: ASSUME ANY AND ALL RISKS INVOLVED IN OR ARISING FROM PARTICIPATION IN THE CONFERENCE AND ASSOCIATED WALK AND EXERCISE, including without limitation, the risks of death, bodily injury or property damage resulting from participation in the one (1) mile walk or in any other exercise, the unavailability of emergency medical care; or the negligent or deliberate act of another person.

RELEASE the City and County of Denver, Denver Botanic Gardens, Sunrise Assisted Living, Secure Horizons, KEZW Radio, RTD, and any other conference sponsors and paid and unpaid volunteers hereinafter referred to, jointly and separately, sponsors, and their directors, officers, agents and employees, associated members, guests or volunteers from any and all liability and AGREES NOT TO SUE them on account of or in connection with any claims, causes of actions, injuries, damages, costs or expenses arising out of the undersigned is said participation, including without limitation, those based on death, bodily injury or property damage, whether or not caused by the negligence or other fault of the City and County of Denver, or the other sponsors or any of their respective directors, officers, agents and employees associated members, guests or volunteers.

INDEMNIFY AND DEFEND the City and County of Denver, the other sponsors, and their respective directors, officers, agents and employees, associated members, guest or volunteers against, and hold them harmless from, any and all claims, causes of action, damages, judgements, costs or expenses, including attorney fees, which in any way rise from undersigned's presence or participation in the Conference, walk or other exercises.

PAY for any and all damages at the Conference, walk or exercise caused by the undersigned, negligently, willfully or otherwise.

TAKE full responsibility for proper participation at the Conference, walk or exercise and agree to conduct himself or herself in a sportsmanlike manner at all times.

I UNDERSTAND that there is a risk of injury and certain physiological changes occurring during and after participation in any exercise program. These changes may include, but are not limited to, muscle and ligament strains, pulls and tears, abnormalities of blood pressure or cardiac arrest, may include shortness of breath, faintness, nausea or dizziness. I further understand that there is a risk of physical injury when participating in any athletic exercise or physical fitness activity.

IN ADDITION, I consent to the use of my name or of any photograph of me that may be taken either individually or as part of a group attending the Conference, walk or other exercise, by any of the sponsors named above or any of their respective directors, officers, agents, and employees, associated members, guest or volunteers, or by any member of the media covering the Conference, walk and exercises, expressly waive any claim for compensation, royalties or damages from any such parties for the use of my name or photograph.

I HAVE read and understand this Agreement. I understand by making this Agreement, I surrender valuable legal rights. I do so freely and voluntarily and request that I be allowed to participate in the "SPRING INTO HEALTH" Conference, walk and exercises.

Signature of Applicant _____

Date _____

Sponsors



Denver Parks & Recreation

SecureHorizons®
from PacifiCare®



Denver Botanic Gardens



Artistic
Renderings LLC