



# Cancer Survivors and Caregivers

You are cordially invited to South Lakeland Relay for Life's Birthday Party!

**When:** April 16th and 17th, 2011,  
2 p.m. Saturday until 8 a.m. on Sunday

**Where:** Lakeland High School  
726 Hollingsworth Road  
Lakeland, FL 33801

*Registration begins at 1 p.m.*



In honor of your battle against cancer, we invite you and your caregiver to join us in celebration of your cancer survivorship by walking the first lap of the Relay for Life. There will be a complimentary reception for all survivors and caregivers. Your strength and courage are a personal testimony of the progress we are making in our fight against cancer. One person, hand-in-hand with another, can make a difference. We hope that you will stay and enjoy the festivities after the Opening Ceremony.

Mail or fax your registration to:  
American Cancer Society  
1920 S. Florida Avenue  
Lakeland, FL 33803  
Attn: South Lakeland Relay  
863.687.6939 (fax)

**The Survivor Victory Lap will immediately follow the Opening Ceremony at 2 p.m.**

## Survivor Registration

Your Name: \_\_\_\_\_

Your Caregiver's Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_ Please check if you do not want to receive emails

Date of Birth: \_\_\_\_\_

Type of Cancer: \_\_\_\_\_ Date of Diagnosis: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

T-Shirt Size: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ XXXL \_\_\_\_\_

Are you registered with The American Cancer Society's Patient Services Center? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are within three years of diagnosis, may our Patient Services Center call you with information?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Waiver:** In consideration of being permitted to participate in Relay for Life, I hereby for myself, my heirs, and person representative assume any and all risks which might be associated with the event, and I further waive, release discharge and covenant not to sue The American Cancer Society, its officers, members, sponsors, organizers and other representatives, or successors and assigns, for any injuries or damages of any kind whatsoever suffered as a result of taking part in the event and related activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature (if under 18) \_\_\_\_\_ Date: \_\_\_\_\_

**You can also register online at [www.relayforlife.org/southlakelandfl](http://www.relayforlife.org/southlakelandfl)**