HELP TO OTHERS		K ter y, April 16, 2011	
Last Name	First Name		Age Sex (on April 16) M/F
Month Day Year A	rea code Telephone	S M L S Shirt size (Child)	
Street address   (include apartment number and/or c/o)   City   Email address   WAIVER. Knowingly and at my own risk I do hereby a for Life Run and other parties associated with the run at acts of active or passive negligence on the part of such or such a such as a s	nd walk from all claims, demands, injuries corporations, organizations, clubs, their se	s, damages, actions or causes of action from all ervants, agents or employees, and hereby assume	The 5K walk will be held at TARGET FIELD, the home of the Minnesota Twins! The walk is for all ages, and participants will receive a commemorative walk t-shirt, and
all the risks associated with my participation in the event. Further, I hereby grant full permission to any and all of the foregoing to use my name, likeness and voice, as well as any photographs, videotape, motion pictures, recordings and any other record of this event in which I may appear for any legitimate purpose including broadcast of the event, the reuse in any media of this broadcast and in advertising and promotion. Signature (by parent or guardian if participant is under 18) You may sign up as an individual walker, organize a team, or sign up with your school. and hygiene education projects			
If you want your funds to be directed to a specific global school project, please enter the project name in the space below. Available school projects may be found on our website. www.h2oforlifeschools.org for schools around the world.   Individual Team Global School partner			
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PRINT OUT THIS ENTRY FORM AND MAIL IT WITH \$20 BY APRIL 12 TO:1310 E. Hwy 96, Suite 235Entry Fees:White Bear Lake, MN 55110Register online or by mail by April 14th: \$20Make check payable to H2O for LifeRace Day Registration: \$25Mini-walkers-5 and under: \$5			

Contact us if you wish to have an informational table positioned around the walk course!