



Walk for LOVE

Acca Shriners REGISTRATION FORM

Start: Saturday, September 26, 2020
End: Saturday, October 3, 2020
Virtual event

Walkers may walk, roll, wherever and whenever they choose from
Saturday, September 26 through Saturday, October 3.

Registration Fee: \$25* (Patients are complimentary)

**All proceeds benefit Greenville and Philadelphia Shriners Hospitals and the Acca Shriners Transportation Fund.*

Registration Form

NAME: _____
EMAIL: _____
STREET
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
BIRTHDATE: _____

- I would like to **START** a Team Team Name: _____
- I would like to **JOIN** a Team Team Name: _____
- I would like to register as an **Individual T-shirt size:** _____
- I would like to make a **Donation:** _____
- Registration payment method:** **Cash** **Check** **Amount Paid:** _____

Please make checks payable to: **Acca Shriners**

Donations can be submitted at registration on event day or mailed to:

Acca Shriners, 1712 Bellevue Ave., Richmond, VA 23227-3920

Waiver Form

Please read before signing.

I understand that my agreement to the terms of this release and waiver is a prerequisite for participation in the Acca Shriners Walk for Love™. I, the undersigned, intending to be legally bound, waive and release for myself, my heirs, executor and administrators, any and all rights and claims for damages, demands and any other actions, which I may have against Acca Shriners, all participating supporters and those entities' representatives, successors and assignees, from my participation in the event, including any and all injuries suffered by me because of my participation in this event. I verify I have full knowledge of the rigors of this walk and the risk involved in participation. I hereby grant permission to Acca Shriners and its sponsors to use all information submitted in my application and any photograph, videotape, recording and any other record of this event including, my likeness and name for any lawful purpose related to the walk and post-walk publicity. Acca Shriners Walk for Love™ is open to all people who are physically fit. It is recommended that anyone with a history of health issues consult with their physician before undertaking the walk.

Under age 18, please check box

LAST NAME: _____ FIRST NAME: _____
SIGNATURE: _____ (Parent/guardian if under 18)
DATE: _____