2011 Epilepsy Unity Walk

Registration and Sponsor Form

Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Email address: _____ Total Amount Collected $_____

Please check one entry category: ☐ Family Individual: ☐ age: under 13 ☐ age: 13-19 ☐ age: 20-30 ☐ age: 30+

Once you have collected $15 in donations, mail it in with your name and t-shirt size to reserve a special Unity Walk T-shirt. Please bring sponsor form and all donations to registration on the day of the event. Prizes will be awarded in each entry category for the most donations collected, but only donations received at registration will be eligible for prizes.

In accepting my or my dependent's participation in the 2011 Epilepsy Unity Walk, I, the undersigned, waive and released and hold harmless The Epilepsy Center, Orchard Park, the district of Jurupa, volunteers, sponsors, and any other affiliates of this event from and against all liabilities, claims, demands, or losses and damages that may occur during my participation of the Epilepsy Unity Walk.

Additionally, I hereby give permission for me or my dependents to be photographed while participating in this event. I understand that these photographs will possibly be used on The Epilepsy Center's website, Facebook, scrap board, newsletter, and local newspapers. I waive any rights of compensation or ownership.

Signature: _____ Date: _____
(Under 18 need parent/guardian's signature)

Print Name: _____

Sponsors

Please make checks payable to: The Epilepsy Center, 6185 Magnolia Ave., Ste. 63, Riverside, CA 92506
All donations are Tax Deductible. 501(c)(3) number 20-2732382.

Name	Address	Amount

Please photo copy this form for additional sponsors.