



**5<sup>TH</sup> ANNUAL**  
**SAT, JUNE 12, 2010**

**Walk-a-thon**  
**OFFICIAL**  
**REGISTRATION FORM**

Registration 9:30am, Walk starts at 10:00am

|                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Last Name         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First Name        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Address           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| City, Postal Code |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tel #             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Volunteer:  Participant:  E-mail: \_\_\_\_\_  
 T-shirt: Men's \_\_\_\_\_ Women's \_\_\_\_\_ Gender: Female  Male  Age:    
 (please specify the commemorative T-shirt size, XS to 3X; to ensure desired T size, register by May 26<sup>th</sup>!)

**PLEASE MAKE CHEQUES FOR PLEDGES PAYABLE TO: NSSRC**

In Celebration Of The 5<sup>TH</sup> ANNUAL Strides For Strokes Event, there are **no registration fees!**  
*First 100 registrants receive a FREE pedometer! To receive your desired T size, register by May 26<sup>th</sup>!*

**NSSRC, 225 East 2<sup>nd</sup> Street, North Vancouver, BC V7L 1C4 or Fax: 778-340-8730 or e-mail [info@nssrc.org](mailto:info@nssrc.org)**

**RELEASE, WAIVER & INDEMNITY**

**IN CONSIDERATION** of the acceptance of my application and the permission to participate as an entrant in the North Shore Stroke Recovery Centre's 5<sup>th</sup> Annual **Strides for Strokes on June 12, 2010**, I, for myself, my heirs, executors, administrators, successors and assigns, **HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE** the North Shore Stroke Recovery Centre, the District of West Vancouver and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property **HOWSOEVER CAUSED**, rising or to arise by reason of my participation in the said event, whether as a spectator, participant, competitor or otherwise, whether prior to, during or subsequent to the event, **AND NOTWITHSTANDING** that same may have been contributed to, or occasioned by, the negligence of any of the aforesaid.

**I FURTHER HEREBY UNDERTAKE** or **HOLD AND SAVE HARMLESS** and **AGREE TO INDEMNIFY** all of the aforesaid from and against any and all liability incurred by any or all of them as a result of, or in any way connected with, my participation in the said event.

**BY SUMITTING THIS ENTRY, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED TO THE ABOVE WAIVER, RELEASE AND INDEMNITY. I WARRANT** that I am physically fit to participate in this event.

|  |                      |                      |      |
|--|----------------------|----------------------|------|
| <input type="text"/>   | <input type="text"/> | <input type="text"/> | 2010 |
| PRINT NAME<br>(if under 18 yrs of age, Parent or Guardian to sign below) | Signature            | Date                 |      |

|                      |                      |                      |      |
|----------------------|----------------------|----------------------|------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 2010 |
| PRINT NAME           | Signature            | Date                 |      |

The personal information on this form is used to process an individual's registration, provide notification of next year's event, and remit tax receipts. Questions about this collection can be directed to the Principal Coordinator at 778-340-5803.