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**5th Annual**

**Transforming Dreams into Reality Walkathon** 

Registration Form

**Saturday, October 22, 2022 - 10:00 am until 2:00 pm**

**Ida Bell Young Park, 5400 Vaughn Rd, Montgomery, Al 36116**

A form must be completed for each attendee. Multiple attendees can register with one check/money order. Attendees also may register online at: <https://NFBAL5thwalk.eventbrite.com>

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supporter(s) of the Affiliation (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check or circle a shirt size below: *Please note: Deadline is October 5, 2022.*

Adult sizes: Small☐ Medium☐ Large☐ XL☐ XXL☐ 3XL☐ 4XL☐ 5XL☐

Youth sizes: Small☐ Medium☐ Large☐ XL☐

**Early Bird Registration**: Adult (19 and up) $25, Youth (6 thru 18) $20, Kids (5 & under) Free

**After Sept. 15th**: Adult (19 and up) $30, Youth (6 thru 18) $25 Kids (5 & under) Free

Enclosed is my check/money order payable to ***NFB of Alabama*** for: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mail registration form and payment to:** NFB of Alabama, Larry Povinelli, 121 Cork Alley, Madison, AL 35758

For questions or assistance contact Tamika Williams, Fundraising Chair

Email: nfba.portcitychapter@gmail.com Phone: (251) 605-7882

**Waiver**

Read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety.

If you are under the age of 18, this form must be signed by you as the participant AND by your parent or legal guardian.

I know that running a road race/ walk-a-thon is a potentially hazardous activity that could cause serious injury. I nor a child of whom I am responsible for should not enter and participate unless parent and/or child are medically able and properly trained, and by my signature, I certify that parent and/or child are medically able to perform this event, and parent and/or child are in good health and are properly prepared. I agree to abide by any decision of an event official relative to any aspect of the parent and/or child's participation in this event, including the right of any official to deny or suspend parent and/or child's participation for any reason whatsoever. I assume all risks associated with running or walking in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by parent and/or child. I understand that bicycles, skateboards, roller skates or blades, and radio headsets are not allowed in the race and parent and/or child will abide by these guidelines. Having read this waiver and knowing these facts and in consideration of the acceptance of parent and/or child entry, I, for myself and anyone entitled to act on parent and/or child's behalf, waive and release National Federation of the Blind of Alabama and its chapters, affiliates, divisions, officers, volunteers and employees/members, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of parent and/or child's participation in this event.

I further give my permission for National Federation of the Blind to use or produce parent and/or child's photos/videos taken during the event for the purpose of promotions or publications. I understand that parent and/or child will not be compensated for the usage of any photos/videos and that they are owned by the National Federation of the Blind and may be used for any lawful purpose.

I also understand that the National Federation of the Blind expects and upholds a welcoming and safe environment for all. Parent and/or child will follow the guidelines of the NFB's code of conduct during any interactions with it's organization.

<https://nfbga.org/code-of-conduct/>/

I, Parent and/or child, have read and understood the above photo release, injury release and code of conduct. I affirm that I am at least 18 years of age, or, if I am under 18 years of age, I have obtained the required consent of my parents/guardians.

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In signing the Acknowledgement of Risk and Waiver Liability I hereby acknowledge and represent: (a) that I have read this document in its entirety, understand it, and sign it voluntarily; and (b) that this Acknowledgement of Risk and Waiver of Liability is the entire agreement between the parties hereto and its terms are contractual and not a mere recital.

Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_