



Participant Registration/Donation Form

Event Site: Western Washington

Participant Name: _____

Team Name: _____

Total Cash/Checks Turned in TODAY \$ _____

Total Credit Card Donation Made TODAY \$ _____

Registered Online? Yes No

Please provide your contact information below:

Address: _____

City: _____ **State** _____ **ZIP Code:** _____

Phone: _____

Email: _____

PRIVACY NOTICE: All personal information provided above will be used by March of Dimes as outlined in its Privacy Policy (available at <https://www.marchofdimes.org/policy.aspx>).

DONATIONS: As a policy matter, March of Dimes prefers to receive unrestricted donations. This enables March of Dimes to direct funds to areas of greatest need and mission impact. March of Dimes will however honor your written request to restrict your personal donation. Walkers cannot legally restrict donations on behalf of their sponsors without the sponsors' written permission.

CONSENT, WAIVER AND RELEASE – Please Read Carefully

Assumption of Risk. I understand that this fundraising event (the “Event”) involves activities that carry inherent risk and could cause harm to me or my child. I knowingly assume any and all risks and assume full responsibility for any risk of injury, death or loss that I or my child/children may suffer as a result of participation in the Event. I understand that this event is organized and managed by community organizers for the benefit of March of Dimes (“MOD”).

Consent to Medical Treatment. I give the event organizer my permission for any first aid or medical care as deemed advisable to be provided to me or my minor child, for transport to a medical facility for further treatment, and for the release of information necessary or useful in connection with such care.

Photo and Video Release. I agree that MOD and its licensees may use any and all photographic images and video or audio recordings of myself or my minor child made during the Event.

RELEASE AND WAIVER. In consideration of MOD permitting me (and my minor child) to participate in the Event, I for myself, my heirs, executors, administrators and assigns, hereby release, waive, discharge, and covenant not to sue MOD, its officers, employees, sponsors, organizers, licensees, or volunteers, and the event-site owner or municipality, for any and all injuries or damages of any kind whatsoever, which I (or my minor child) may suffer while taking part in the Event or as a result thereof, including any first aid given at the Event.

Participant Signature: _____ (SIGN HERE) Date: _____

(If participant is a minor, then parent or guardian must sign) **Check:** ☐ Parent ☐ Legal Guardian