## America's Greatest Heart Run & Walk Registration Form

Minimum donation of \$30 for participants 16 years & older is required at registration Complete all fields that apply or register online at www.uticaheartrunwalk.org

NAME:			Yes, I am on a team
ADDRESS:		_	TEAM NAME:
CITY: STATE:	ZIP:	_	TEAM CAPTAIN:
PHONE: EMAIL:		_	
☐ I am a survivor of heart disease and/or stroke			My company offers matching gifts
☐ I am under the age of 16	RUN#	]	(Please attach any documentation)
In signing for myself (or the participant named above if he or she is all blame for injury, misadventure, harm, loss or inconvenience suffi- participant in photographs, videos, online or via other media record	ered in any of the activities associated with the	the American H he said event. I	leart Association and all sponsors be they individuals or organizations, singly or collectively, of grant full permission to the organizers of this event to use and publish my name and image as a
PARTICIPANT/GUARDIAN SIGNATURE			
	Minimum donation of \$30 for par	rticipants 16	& Walk Registration Form years & older is required at registration while at www.uticaheartrunwalk.org
NAME:			Yes, I am on a team
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			Heart Association and all sponsors be they individuals or organizations, singly or collectively, of

participant in photographs, videos, online or via other media recordings.

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