



First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

E-mail (confirmation will be sent via e-mail): _____

Team Name (if applicable): _____ Check here if you are the team captain

**Please note everyone must register as an individual this year.
You can all be on the same team but there is no longer a family registration.**

Individual Registration, \$20 adult/\$17 child donation (includes 1 t-shirt, while supplies last)..... \$ _____

(Please check your desired t-shirt size):

Adult: S M L XL XXL

Child: XS S M L

Additional Donation (optional)..... \$ _____

Total \$ _____

Please add me to the DS Support Newsletter

I would like to volunteer for the walk

WAIVER AND RELEASE OF LIABILITY

I, hereby waive all claims against DS Support and the Cantigny, sponsors or any personnel for any injury or loss I might suffer by participating in, or as a result of this event. I attest that I am physically fit and prepared for this event. I grant full permission for organizers to use photographs of me and/or quotations from me in legitimate accounts and promotions of this event.



Signature X _____ Date: _____
(Parent/Guardian's signature if entrant is under age 18)