Registration Form*

Susan G. Komen North Texas Race for the Cure® • Saturday, June 12, 2010 • HP, Legacy at Parkwood, Plano

***REGISTER ONLINE INSTEAD OF COMPLETING THIS FORM AT www.komennorthtexas.org.**

For office use only. BIB# _____

PLEASE PRINT:

TEAM NAME

EMAIL ADDRESS

LAST NAME

FIRST NAME

ADDRESS

PHONE

CITY

STATE

ZIP

DATE OF BIRTH (MMDDYY)

MALE/ FEMALE

AGE 6/12/10

☐ I am a Breast Cancer Survivor of _____ years.

☐ I would like to be recognized as a breast cancer survivor by receiving a special survivor Race bib, pink t-shirt and cap.

☐ This is my first time to participate in the Susan G. Komen North Texas Race for the Cure®.

SHORT SLEEVE T-SHIRT SIZE:

☐ Youth L

Adult: ☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL

(T-shirts guaranteed to first 14,000 registrants only.)

ENTRY FEES (NON-REFUNDABLE):

☐ Registration $35 $_____

☐ Registration (12 and under and 65 and over) $18 $_____

☐ I wish to be chip timed $5 $_____

☐ In the Pink® $50 $_____

☐ Sleep In for the Cure® $40 $_____

☐ Pink Ribbon Tree____# of small ribbons @ $2 $_____

In celebration of: _____

☐ Elizabeth's Garden Tulips _____# @ $10 $_____

(Please use separate order form to specify wording for Tulip.)

☐ 20th Anniversary Gift $20 $_____

TOTAL **$_____**

PAYMENT INFORMATION:

☐ Cash ☐ Check (check # _____)

☐ Credit Card: ☐ MC ☐ Visa ☐ AMEX ☐ Discover

Number _____

Three-Digit Security Code _____ Exp:_____

Register online at **www.komennorthtexas.org** until June 1, 2010. This event will occur rain or shine. We reserve the right to cancel in extreme circumstances. In that event, there will be no refunds; rather your entry fee will be used as a donation to the Susan G. Komen North Texas Race for the Cure.

(Participant must sign in order to be eligible to participate in Race):

PHOTOGRAPHIC RELEASE: By accepting this race bib and participating in this event (the "Event"), I give my full consent and permission to Susan G. Komen for the Cure, its local affiliates and races (as defined below), their sponsors and cor porate sponsors, their successors, licensees, and assigns the irrevocable right to use, for any purpose whatsoever and without compensation, any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of the Event.

WAIVER AND RELEASE OF CLAIMS: I understand that by accepting this race bib and participating in this Event, I give my consent to these provisions in consider ation for being permitted to participate in this Event. I further understand that I may be removed from this competition if I do not follow all the rules of this Event. I am a volun tary participant in this Event, and in good physical condition. I KNOW THAT THIS EVENT IS A POTENTIALLY HAZARDOUS ACTIVITY AND I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT THAT MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT. I, FOR MYSELF, MY NEXT OF KIN, MY MINOR CHILDREN THAT ATTEND THE EVENT, MY HEIRS, ADMINISTRATORS, AND EXECUTORS, HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST THE SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC. D/B/A SUSAN G. KOMEN FOR THE CURE, THE NORTH TEXAS AFFILIATE OF THE SUSAN G. KOMEN BREAST CANCER FOUNDATION D/B/A THE NORTH TEXAS AFFILIATE OF SUSAN G. KOMEN FOR THE CURE, THEIR AFFILIATES AND ANY AFFILIATED INDIVIDUALS, ANY EVENT SPONSORS AND THEIR AGENTS AND EMPLOYEES, AND ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT (COLLECTIVELY, THE "RELEASEES") FOR ANY INJURY OR DAMAGES I MIGHT SUFFER IN CONNECTION WITH MY PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT. THIS RELEASE APPLIES TO ANY AND ALL LOSS, LIABILITY, OR CLAIMS I MAY HAVE ARISING OUT OF MY PARTICIPATION IN THIS EVENT, INCLUDING BUT NOT LIMITED TO, PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY FALLS, CONTACT WITH AND/OR THE ACTIONS OF OTHER PARTICIPANTS, CONTACT WITH FIXED OR NON-FIXED OBJECTS, CONTACT WITH ANIMALS, CONDITIONS OF THE PREMISES OF THE EVENT, NEGLIGENCE OF THE RELEASEES, RISKS NOT KNOWN TO ME OR NOT REASONABLY FORESEEABLE AT THIS TIME, OR OTHERWISE.

This Photographic Release and Waiver and Release of Claims (collectively, the "Release") shall be construed under the laws of the state in which the Event is held.

I understand that I have given up substantial rights by accepting this race bib and participating in this Event, and have participated freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my acceptance of this race bib and my participation in this Event to be a complete and unconditional release of liability to the greatest extent allowed by law.

Participant's Name _____

SIGNATURE _____

Date _____

Parent or Guardian _____

Signature if under age 18

Photocopied entry forms are acceptable, but the form must not be altered in any way.