



# Registration Form

## 2024 Columbus Race for the Cure

### RETURN TO UFCW 1059 by **04/08/24**

Race Day is 5/18/2024

#### PARTICIPANT INFORMATION (Please print clearly):

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_

By providing your email, you will receive communications, marketing, and other offerings from Komen. You may unsubscribe at any time. See our Privacy Policy on Komen.org for more information.

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number:  Mobile  Home \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

By providing your phone number, you consent to receive automated reminders about event information from Komen, including via phone call or text message. Standard message and data rates may apply.

#### TEAM AFFILIATION (Please select one):

Join a Team! Team Name: UFCW Local 1059

#### MINOR PARTICIPANTS (All participants under 18 years of age):

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Please select your route option:  5k  1 mile

#### REGISTRATION

	Family:	Member:
<input type="radio"/> Adult	\$ 15.00	\$ 0
<input type="radio"/> Youth (Under 18)	\$ 12.50	\$ 0

Adult Registration Fee: \$ \_\_\_\_\_

Youth Registration Fee(s): \$ \_\_\_\_\_

**Total Registration Amount:** \$ \_\_\_\_\_

**Make your personal donation to end breast cancer. \$25 can buy research supplies so scientists can work toward finding new ways to prevent, detect and/or treat breast cancer.**

**\$50** - Every 50 seconds, somewhere in the world, someone dies from breast cancer.

**\$100** - Your donation could provide groceries for a breast cancer patient for a week.

**Any amount you give will help save lives!**

**Your Personal Donation Amount:** \$ \_\_\_\_\_

**Total Payment Due:** \$ \_\_\_\_\_

**PAYMENT:** If paying by check, please make your check payable to "Susan G. Komen" and submit your total payment with this registration form. Only Personal Donation gifts will be applied to your fundraising goal.

#### Would you like to be recognized as a Breast Cancer Survivor or Living with Metastatic Breast Cancer?\*

- No
- Yes, I would like to be recognized as a Breast Cancer Survivor.
- Yes, I would like to be recognized as Living with Metastatic Breast Cancer

\*Complimentary survivor or MBC t-shirt will be mailed. By checking this box, you also consent to being acknowledged by Komen as a survivor or person living with metastatic breast cancer. This acknowledgment includes recognition at our events, engagement opportunities, and communications specific to survivors or those living with breast cancer.

#### Fundraising Goal:

How much will you raise to end breast cancer?

\$ \_\_\_\_\_

#### Select Your T-shirt Size(s):

Adult Sizes:  S  M  L  XL  2XL  3XL

Youth Sizes:  YS  YM  YL

Decline T-shirt(s)

Send completed form and donations to:

Susan G. Komen  
P.O. Box 801889, Dallas, Texas 75380

Contact Komen at 1-877-465-6636, option 4 or email [info@komen.org](mailto:info@komen.org) with any questions.

**To complete this form, please read the waiver on the reverse side and sign below for yourself and any applicable minor participants.**

I certify I am at least 18 years old. I understand minors under 18 must be accompanied by a parent/guardian who is also a registered to participate. I understand I have given up substantial rights by accepting this agreement and have signed it freely and voluntarily. My acceptance is a complete and unconditional release of liability.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## PARTICIPANT WAIVER & RELEASE

I AGREE ALL REPRESENTATIONS, RELEASES, WAIVERS, AND COVENANTS ARE GIVEN ON BEHALF OF ME, MY MINOR CHILDREN, AND WARDS WHO PARTICIPATE. MINORS UNDER 18 YEARS OF AGE MUST BE ACCOMPANIED BY A PARENT/LEGAL GUARDIAN WHO IS ALSO A REGISTERED PARTICIPANT.

I hereby voluntarily assume full and complete responsibility for, and the risk of, any injury or accident that may occur to me and (if applicable) my minor children/wards/dogs during my participation in the Event or while on Event premises. I am aware of and appreciate the risks that may result from participation, including falling, coming into contact with people/animals, aggressive animal behavior, exposure to COVID-19, negligent/intentional acts, driving to/from Event, traffic, defects/conditions of premises, exposure to extreme weather, serious bodily injury, death or risks not known to me or not reasonably foreseeable at this time.

In consideration for participating in the Event, I for myself and next of kin/heirs, waive and release The Susan G. Komen Breast Cancer Foundation, Inc. ("Komen"), its directors, employees, volunteers, agents, affiliates, vendors, contractors, Chicago Park District and successors (collectively, "Releasees"), from any and all claims, injuries, damages and attorneys' fees arising out from participating activities including but not limited to walking, running, fundraising, gathering with people and (if applicable) dogs, and using public streets and facilities ("Activities"). I, on behalf of myself and my releasors, intend by this Waiver and Release to release in advance, and to waive my rights and to discharge all of the releasees from all claims, losses or liabilities I or my releasors might suffer in connection with my participation, or which may hereafter accrue to me or my releasors (including, but not limited to, claims, losses or liabilities for death, bodily injury or property damage) even though that liability may arise from negligence or carelessness on the part of the Releasees, from dangerous or defective property or equipment owned, maintained or controlled by them or because of their possible liability without fault. I understand and agree that this Waiver and Release is binding on my releasors, assigns and legal representatives.

If Event is held in CA:

This Release extends to claims and facts unknown and unsuspected to exist at the time of executing this Release. All rights under Section 1542 of the CA Civil Code are expressly waived with respect to any of the claims, injuries, or damages described in this agreement. Section 1542 of the California Civil Code: A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS THAT THE CREDITOR OR RELEASING PARTY DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, AND THAT IF KNOWN BY HIM WOULD HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR OR RELEASED PARTY.

## PUBLICITY RELEASE

I give Komen the irrevocable, perpetual, and worldwide right to use, copy, publicly perform, display, distribute, modify, translate, and create derivative works of, for any purpose and without compensation, my statements, information, photos, videos, audio, and other recordings of me, and any original material I create, whether provided/created by me or created by Komen or its agents, related to Event ("Materials").

I hereby acknowledge Komen's sole ownership of Materials provided by me when (i) uploaded and/or submitted through an online portal, (ii) attached to an email, or (iii) by any other electronic means via cell phone or computer. I waive the right to inspect or approve Materials. Komen may assign any of the above rights to third parties. I release the Komen from any liability, damages, or claims resulting from the use of the Materials, including, but not limited to, claims for libel or invasion of privacy. I understand and agree that the terms herein are binding on my releasors, assigns, and legal representatives.

## ACKNOWLEDGMENT

I understand that all donations made in connection with the Event are non-refundable and non-transferable, even if I do not participate in the Event or if the Event is canceled for any reason. I also understand that the registration fee is non-refundable, non-transferable, and not tax deductible. If I have a fundraising minimum requirement and have not met it by the deadline, I may choose not to participate or be prohibited from doing so.

I am medically/physically able to participate and complete the Event. I take responsibility for consulting a physician to discuss my participation. If I am aware of or under treatment for any physical infirmity, ailment or illness, I have discussed the event and my participation with my medical care provider(s) familiar with such condition and he/she has approved my participation. I will maintain personal health insurance at all times during my participation. In the event of injury, accident or illness during my participation, I consent to receive, and authorize Event organizers, officials, volunteers, participants and spectators to use their discretion to administer, first aid, medical care and/or medical treatment. I consent to emergency medical care/transportation if injured, as medical professionals deem appropriate. This extends to liability arising out of or connected to medical care/transportation provided. I certify that I have not had symptoms of or been exposed to COVID-19 in the past fourteen days. If impacted by COVID-19 I will not participate.

In consideration for being permitted to participate in the Event, I hereby agree to adhere to the policies of the Event. I understand that the Event organizers reserve the right, in their sole discretion, to refuse registration and/or participation to anyone at any time before or during the Event. I will obey all laws and safety procedures relating to Event. I will exhibit appropriate behavior and not endanger others or negatively affect the Event or any person/property. I will read the Event description and rules for my participation and I will abide by all rules and regulations established by the Event organizers and personnel as well as the local vehicle code. I further agree that my participation is subject to the sole discretion of the Event organizers and the Event medical director, and that my participation may be limited for medical or other safety-related reasons.

I understand that, in connection with my participation, I have Komen's limited permission to use the Event's logos for personal use as a participant. I understand that I do not have permission to, and will not use, any other logo, phrase, name or trademark that is the property of Komen without Komen's prior written approval. I understand that Komen is the sole and exclusive owner in all rights, title, and interest in and to numerous trademarks and service marks that are related to breast cancer awareness and charitable fundraising services, together

with the associated goodwill therewith (collectively, "Komen Marks"). I hereby acknowledge Komen's ownership of the Komen Marks, and agree not to contest or assist others to contest the ownership and validity of them, and further agree I will not, without written license from Komen, use any Komen Mark or any logo, phrase, name or trademark that is confusingly similar to a Komen Mark. Any use of the Komen Marks by me (whether or not authorized by Komen), shall inure to the benefit of Komen.

Dogs are welcome at some of our events. Please check the Q and A section to find out if the event you are registering for is one of them. If you choose to bring your dog, you understand and agree that The Susan G. Komen Breast Cancer Foundation, Inc. ("Komen") reserves the right to remove my dog and me from the Event premises for any reason whatsoever. If removed or barred access, I will not be eligible for a refund. I further agree to adhere to the following requirements:

1. I have considered the temperament of my dog before deciding whether to bring them. I acknowledge that my dog has a gentle nature and is well-behaved in large crowds of people and around other dogs. My dog is not considered hazardous or aggressive based on their past actions and what is known of their breed. If my dog appears aggressive or is a breed known to be aggressive, Komen has the right to remove my dog and me from the Event premises.
2. Only one dog may attend per Participant.
3. My dog will be attended by an adult at all times. Dogs are prohibited from roaming the Event premises. All dogs must be leashed at all times.
4. My dog is healthy and up to date on their required vaccines.
5. I will follow all laws and ordinances related to proper pet care while at the Event. This includes but is not limited to cleaning up after my dog. If my dog's breed is restricted by law or ordinance from attending public events, I will refrain from bringing my dog.

This agreement will be construed under the laws of Texas. If any provision is deemed unenforceable, Komen may modify to the extent needed to be deemed enforceable and all other provisions will remain in full force and effect.

**Thank you for your support  
of Susan G. Komen!**