



Walker Registration & Waiver Form
Terri Brodeur Breast Cancer Foundation, Inc. (TBBCF)
2023 TBBCF Walk for a Cure
Saturday, October 7, 2023

Please complete the form, sign the waiver, and return with your registration fee to:
Terri Brodeur Breast Cancer Foundation, TBBCF, 187 Williams St, New London, CT 06320.

PARTICIPANT CONTACT INFORMATION

First Name: _____

Last Name: _____

E-mail: _____

Phone: _____

Address: _____

City/State/Zip: _____

How did you hear about the walk? _____

REGISTRATION INFORMATION
Registration Fee is \$30

Choose One

- IN-PERSON Full Marathon - \$500 fundraising commitment
- IN-PERSON Half Marathon - \$250 fundraising commitment
- IN-PERSON Quarter Marathon - \$200 fundraising commitment
- IN-PERSON Family Friendly 5K - \$150 fundraising commitment

- VIRTUAL WALKER - \$150 fundraising commitment for any marathon
 - Full Marathon Half Marathon Quarter Marathon Family Friendly 5K

- Student Walker - \$100 fundraising commitment for any marathon
Middle school, high school, and college students (ages 12-22 yrs.)
 - Full Marathon Half Marathon Quarter Marathon Family Friendly 5K
 - IN PERSON VIRTUAL

- Cancer Survivor - \$100 fundraising commitment for any marathon
 - Full Marathon Half Marathon Quarter Marathon Family Friendly 5K
 - IN PERSON VIRTUAL

Are you a breast cancer survivor? Yes No

Are you a cancer survivor? Yes No

Gender: Male Female

Age Division: 17 & under 18 to 29 30 to 44 45 to 60 61 and over

Date of Birth: _____

Age on Race Day: _____

Guardian (ages 12-17 years). If not applicable, print n/a: _____

Emergency Contact Name: _____

Emergency Contact Daytime Phone # _____

Combined years as a walker/volunteer for Terri Brodeur Breast Cancer Foundation, TBBCF (incl. this year):

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Joining or Creating a Team? Team name & Captain: _____

PAYMENT INFORMATION

In addition to a fundraising commitment, each walker must pay a \$30 registration fee. Check, payable to Terri Brodeur Breast Cancer Foundation, TBBCF, must be enclosed to process registration.

Walker Waiver Form Terri Brodeur Breast Cancer Foundation, Inc. (TBBCF) Walk for a Cure

I have read, understand, and agree to all conditions stated in the fundraising, registration and release of liability found in this waiver.

Specifically, by registering for the event I agree to the fundraising minimum for the event for which I am registering: IN PERSON Walk -1) full marathon - \$500; 2) half marathon - \$250; 3) quarter marathon - \$200; 4) 5K - \$150; 5) students or cancer survivors - \$100. VIRTUAL Walk – Any distance - \$150; students or cancer survivors \$100. I agree that all donations and registration fees are non-refundable. I understand and agree that if I have not raised my committed contributions by the time the event commences that I may choose not to participate or will continue fundraising efforts to reach commitment by December 31, 2022. I desire to participate in the TBBCF Walk for a Cure. I acknowledge that walking has inherent dangers. I assume all risk(s) of participating in this event.

Attaining age twelve (12) as of the date of the walk is the minimum age for a minor child with

permission of a guardian or parent to participate in the walk. I hereby certify that I (and/or any child(ren) 12-17 years of age who I sign on behalf of) am (are) in good health and have trained to walk the distance of the Walk being participated in. I hereby for myself, my heirs, and executors, (and on behalf of such minor child/ren) waive, release and hold harmless the Terri Brodeur Breast Cancer Foundation, Inc. also known as TBBCF (hereinafter "TBBCF") and all organizations and persons associated with The Terri Brodeur Breast Cancer Foundation Inc.'s fundraiser known as TBBCF Walk for a Cure, including but not limited to the state, county and local municipalities wherever any part of the event takes place, sponsors and the officers, directors and shareholders and/or members agents, employees and volunteers of each, medical and other personnel assisting with the event, their representatives from any and all claims, liabilities, rights or causes of action of whatsoever kind of nature, including but not limited to those arising from negligence on the part of any of the aforementioned persons or entities, for damages for any and all injuries to me or my property, or for damage caused by me or by anyone else (including Acts of God), in connection with participating.

I agree to allow TBBCF and its contractors, vendors, agencies, and sponsors to use my name, photograph and likeness for any legitimate purpose related to the advertising or promotion of the Walk. I acknowledge that dogs are not permitted. I waive all liabilities regarding any minor accompanying me. If signing on behalf of a minor, I represent that any such minor child(ren) has/have reached the age of twelve (12) or will have attained the age of twelve (12) as of the date of the walk and at all times I will accompany such child(ren) or such child(ren) shall be accompanied by an adult to whom I have given express permission to do so at the event. I have carefully read this Waiver and fully understand its content and am aware that this is a release of liability and I agree of my own free will.

Participant Signature / Guardian (if under 18) and Date:

Print Child's Name and DOB

Thank you for registering! Every gift is tax-deductible. Federal Tax EIN 20-41498

