

First Name

Walker Registration & Waiver Form Terri Brodeur Breast Cancer Foundation, Inc. (TBBCF) 2025 TBBCF Walk for a Cure

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

Last Name:	
E-mail:	
Phone:	
Address:	
City/State/Zip:	
How did you hear about the walk?	
REGISTRATION INFORMATION Registration Fee is \$20 May 20-June 8, 2025 \$30 June 9-Aug 31,	2025; \$40 after Aug 31, 2025
Choose One – Participants have until December 31, 2025 to fulfill their f □ 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	undraising commitment.
□ VIRTUAL WALKER - \$150 fundraising commitment for any marathon □Full Marathon □Half Marathon □Quarter Maratho	n □Family Friendly 5K
□ Student Walker - \$100 fundraising commitment for any marathon Middle school, high school, and college students (ages □Full Marathon □Half Marathon □Quarter Marathon □IN PERSON □VIRTUAL	
☐ Cancer Survivor - \$100 fundraising commitment for any marathon☐Full Marathon☐Half Marathon☐Quarter Maratho☐IN PERSON☐VIRTUAL	n □Family Friendly 5K

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:		
T-shirt size: □Small □Medium □Large □Xlarge □XXLarge □XXXLarge □ No shirt – Thanks!		
Emergency Contact Name:		
Emergency Contact Daytime Phone #		
Combined years as a walker/volunteer for Terri Brodeur Foundation, TBF (incl. this year):		
Joining or Creating a Team? Team n	ame & Captain:	

PAYMENT INFORMATION

In addition to a fundraising commitment, each walker must pay a registration fee of \$20 May 20-June 8, 2025; \$30 June 9-Aug 31, 2025; \$40 after Aug 31, 2025. Check, payable to Terri Brodeur Breast Cancer Foundation, TBBCF, must be enclosed to process registration.

2025 Walker Waiver Form

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

I have read, understand, and agree to all conditions stated with regard to: fundraising; registration; and release of liability found in this waiver. I acknowledge that walking has inherent dangers. I assume all risk(s) of participating in this event.

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 that I will continue fundraising efforts to reach my commitment by December 31, 2025. I desire to participate in the TBBCF Walk for a Cure.

Attaining the age of 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: am (and/or any child(ren) 12-17 years of age who I sign on behalf of is/are) in good health; am medically able; and have properly trained to walk the distance of the Walk being participated in. I agree to abide by the decision of any of the Terri Brodeur Breast Cancer Foundation, Inc.'s (hereinafter "TBBCF") representatives regarding my ability to participate or to continue participating in the event at any time prior to or during the event. I acknowledge that I as well as any minor child(ren) accompanying me, am/are voluntarily participating at my/our own risk. I acknowledge that I am fully aware and accept that injury may arise from my own negligence or that of others as well as conditions related to travel to and from the event or conditions existing at the events locations. I acknowledge that the releasees are not responsible for errors, omissions, acts or failures to act by any party or entity conducting the event or activity on behalf of TBBCF. I further acknowledge that this activity may involve a test of personal or physical and mental limits and that it may carry with it the potential for serious injury, paralysis or even death. I hereby for myself, my heirs, and executors, (and on behalf of all such minor child/ren) waive, release, hold harmless and agree to indemnify the Terri Brodeur Breast Cancer Foundation, Inc. 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. I 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:

