



EARLY LEARNING CENTER

PROMOTING A HEALTHY ACTIVE LIFESTYLE AND  
FAMILY ENGAGEMENTS.  
FUN RUN/WALK FOR ALL AGES, FAMILIES, GROUPS,  
STROLLERS/WHEELCHAIRS.

Saturday May 13, 2017

Participant's Name: \_\_\_\_\_

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

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

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

Age: \_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

1 mile \_\_\_\_ 5K \_\_\_\_

In case of emergency, please notify:

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

Contact Number: \_\_\_\_\_

**Waiver:** The undersigned does hereby authorize the SKC Early Learning Center and its sponsors to photograph him/her while participating in a fun run/walk event and agrees that such entity may use photos, digital, and print material prepared from there, for the purpose of promoting the goals of SKC Early Learning Center and/or its sponsors. I acknowledge that I am entering this event at my own risk and assume any and all responsible for injuries I may incur as a direct result of participating in this event.

Participant Signature (If over 18)

Date:

Parent/Guardian Signature (If participant is under 18)

Date: