



3rd Annual CHARITY of your CHOICE WALK

Saturday, April 10th 2010

2010 Walker Registration Form

*=Required

*First & Last Name _____

*Address _____ *Email _____

Type of Registration: _____ Adult \$25 (\$30 after March 31st) _____ Child \$10 (\$15 after March 31st)

Total Amount Paid: \$ _____ Cash Check # _____ (All checks must be made out to TelfairLife)

I would like my registration fee to be donated to (please check one):

- Second Mile Mission Center
- Fort Bend Family Promise
- Pregnancy Resource Center
- Fort Bend Education Foundation
- The Arc of Fort Bend County
- Child Advocates of Fort Bend
- Shape Up Sugar Land
- Brazos Bend Guardianship Services
- Asians Against Domestic Abuse
- East Fort Bend Human Needs Ministry
- Fort Bend Habitat for Humanity
- Fort Bend Community Partners Rainbow Room
- Fort Bend Regional Council on Substance Abuse

I am a member of a team of walkers. Team name: _____

I would like to: Run Walk

Preferred T-shirt Size (circle): S M L XL

Adult sizes. Based on availability.

CHARITY OF YOUR CHOICE WALK RELEASE AND INDEMNIFICATION

The Charity of your Choice Walk will take place within the Telfair community (the "Community") portions of which are owned, maintained and/or operated by one or more of the following: Telfair Community Association, Inc., Telfair Commercial Association, Inc., Telfair Community Council, Inc., NNP Telfair, L.P. and Newland Communities, LLC (collectively, "Telfair"). The Charity of Your Choice Walk involves walking - an activity which may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic and conditions of the road. In consideration of being allowed to participate in this event, I agree to assume all risks, including personal injury or death, arising in any way out of my participation in the Charity of your Choice Walk and related activities. It is my responsibility to dress appropriately. Although route maps, rest stops, refreshments, and other assistance may be made available during this event, I am solely responsible for my own health and safety. I represent and warrant to Telfair that I am physically fit and able to participate in this event and I agree to stop and request assistance if I experience any symptoms including, without limitation, dizziness, excessive fatigue, shortness of breath, pain or any other conditions which would make it difficult or unsafe to continue. I acknowledge that Telfair has the right to refuse entry to anyone deemed medically at risk in taking part in this event, or if I commit any injurious or illegal act. As consideration for being allowed to participate in the Charity of Your Choice Walk, I AGREE TO INDEMNIFY, PROTECT, HOLD HARMLESS AND DEFEND THE TELFAIR AND ITS RESPECTIVE LEGAL REPRESENTATIVES, VOLUNTEERS, DIRECTORS, SPONSORS, MEMBERS, PARTNERS, AGENTS, EMPLOYEES, OFFICERS, DIRECTORS, PARENTS AND SUBSIDIARIES, FROM AND AGAINST ALL CLAIMS, DEMANDS, DAMAGES, INJURIES, LOSSES, LIENS, CAUSES OF ACTION, SUITS, JUDGMENTS, LIABILITIES AND EXPENSES, INCLUDING COURT COSTS AND ATTORNEY'S FEES OF ANY NATURE, KIND OR DESCRIPTION (INCLUDING WITHOUT LIMITATION, CLAIMS FOR PROPERTY DAMAGE, INJURIES TO OR DEATH OF ANY PERSON OR ENTITY) ARISING OUT OF MY PARTICIPATION IN THE CHARITY OF YOUR CHOICE WALK EVEN IF CAUSED IN WHOLE OR IN PART BY THE SOLE OR CONCURRENT NEGLIGENCE OF TELFAIR AND WHETHER OR NOT SUCH SOLE OR CONCURRENT NEGLIGENCE OF TELFAIR WAS ACTIVE OR PASSIVE OR BY ANY MATTER OR THING IN WHICH LIABILITY MIGHT BE IMPOSED. I permit Telfair the free use of my name and likeness in any newsletters, web sites, and other medium or material promoting this event or future events and I relinquish all rights thereto for these purposes. This release and indemnification agreement shall be as broad and inclusive as is permitted by applicable law. If any portion of it is held invalid, the balance shall continue in full force and effect. I agree to pay the fee stated on the registration form and agree that this fee is non-refundable. I agree to supervise, monitor and be responsible for the actions of your children under 18 years of age participating in the event with me and that their participation is subject to all terms and conditions described above. By signing below, I acknowledge that I have read, understand and agree to the terms and conditions of this Agreement on my own behalf and on behalf of any minor children participating with me.

Signature of each walker (Parent or Legal Guardian if under 18yrs. old)

Date

**Mail registration form & payment to:
TelfairLife • 19901 Southwest Freeway, Suite 210 • Sugar Land, TX 77479**