LOVE THE SKIN YOU'RE IN, INC 5th Annual Walk-A-Thon



REGISTRATION, WAIVER AND RELEASE FORM

Full Name:			Gender:	
Male / Female (circle one)	Age: (as of)		_ _	
Mailing Address:				
City:	Zip Code:			
EVENT DISCLAIMER: Please review the following waiver and disclaimer. By adding your signature, you accept this waiver and disclaimer.				
I,	ve a risk of injury, incled on the behalf of my w. I hereby release ar ficers, board of truster for injury, death, or c	uding bodily injury heirs and legal rep nd discharge Love th es, members, agen lamages and/or any	, and assume the risk for presentatives and to the e Skin You're In, Inc., and t and representatives, of y other claims, demands,	
Signature:		Date:		
Signature of Parent: under 18)		Date:	(If	