



WALK A MILE IN THEIR SHOES
THURSDAY, APRIL 20, 2017
7 P.M.
Carolina Wren Park



REGISTRATION FORM

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____
Group Name: _____

WAIVER AND RELEASE (Please Sign Below)

In consideration of the walk entry, I, my heirs, my administrators, and assigns, forever release and discharge any and all rights, demands, and cases of suit or action, known or unknown that I may have against Walk a Mile in Their Shoes, Foothills Alliance for any and all injuries arising or resulting from participation in this race. I attest that I am physically fit and prepared for this event. I give my consent to permit emergency treatment in the event of injury or illness while participating in this event. I also agree to observe and abide by all traffic laws during the walk. MY SIGNATURE BELOW IS AN AFFIRMATION THAT I HAVE READ AND UNDERSTAND THE ABOVE.

Signature _____

\$20 REGISTRATION

Foothills Alliance will have shoes available for use; however, creativity is encouraged and awarded.

Awards for "Most Creative Shoe", "Highest Heel" and "Most Group Participation".

Please mail this form and your registration fee to:

Foothills Alliance
216 E. Calhoun St.
Anderson, SC 29621

Questions: Annette Caudell at annette.caudell@foothillsalliance.org or 864-231-7273
Website: www.foothillsalliance.org