



2019 Walk Registration

Saturday, April 13, 2019

Walk is at: Church of the Epiphany, 11000 Smoketree Drive, Richmond, VA 23236

Registration is \$25 per walker age 13 and over. (No charge for age 12 and under.)

Mail form and check to: The Compassionate Friends RVA, 1119 Worsham Green Terrace, Midlothian, VA 23114

Given that registrations must be received by April 1st to ensure that you will receive a Walk t-shirt – you may want to call or email the chapter & let us know your registration is on its way: (804) 458-9000 or tcfuva@hotmail.com

Please fill out one form for each Walker age 18 and over.

Name: _____ Phone No.: _____

Email: _____ @ _____ . _____

Walking in memory of: _____ Relationship: _____

Walking in memory of: _____ Relationship: _____

Please list all children walking who are under age 18 (age 12 and under walk for free):

Name: _____ 12 and under _____ age 13+ (\$25 event fee)

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Name: _____ 12 and under _____ age 13+ (\$25 event fee)

LIABILITY WAIVER MUST BE SIGNED BEFORE MAILING: Complete a separate form for each person walking, including children.

In consideration of being accepted as a participant in the TCF Inc., Walk to Remember, I hereby affirm, acknowledge and agree to the following: 1. That I assume all responsibility for any and all damages to, or theft of, my personal property or any bodily injury (including death) that may occur to me, and further, I assume responsibility for property damage and bodily injury (including death) that I may cause to others, in each case arising or resulting from, incidental to, or as a consequence of, my participation in the TCF Inc., Walk to Remember; 2. That I, for myself, my heirs, my executors and administrators, release and hold harmless from and waive all claims, damages, and rights of action, present or future, whether the same be known or unknown, anticipated or unanticipated, foreseen or unforeseen, arising or resulting from, incident to or as a consequence of, my participation in the TCF Inc., Walk to Remember, which I may now or hereafter have against The Compassionate Friends, Inc., any business or companies along the route and any and all sponsors and volunteers for said event, and the respective directors, employees and agents of all of the foregoing; 3. That I grant the permission for use of my name and/or picture in any broadcast, photograph, video, or other account of The Compassionate Friends, Inc., Walk to Remember; and 4. That I am aware of the physical demands and hazards of participating in a walking event such as The Compassionate Friends, Inc., Walk to Remember.

Signature: (Parent or Guardian if under 18) _____

Date: _____



The Compassionate Friends
RVA Chapter
Supporting Family After a Child Dies