

**Registration/Donation Form** Please print clearly.

- **FREE** online registration at [www.sandyovarian.org](http://www.sandyovarian.org)
- **Please use one form for each participant.**

First name \_\_\_\_\_ Last name \_\_\_\_\_

Gender M F Birth date \_\_\_\_\_ Email \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age on Race Day \_\_\_\_\_ ADDITIONAL DONATION AMOUNT \_\_\_\_\_

Pledge this donation to: Individual Name \_\_\_\_\_ or Team Name \_\_\_\_\_

**T-SHIRT (circle one)**

T-shirt Size Adult S M L XL XXL

T-shirt Size Youth YS YM YL

**PLEASE CIRCLE ALL THAT APPLY**

I am an ovarian cancer survivor

Canine

Sleepwalker

I am participating as a Team Member: Team Name \_\_\_\_\_

**BILLING INFORMATION**

Cash Check Charge

Visa Mastercard Amex Name on card \_\_\_\_\_

Card # \_\_\_\_\_ Expires \_\_\_\_\_ Security code \_\_\_\_\_

**Registration Fees- Circle All That Apply**

Individual before 4/17 (\$25) after 4/17 (\$30)

12 or under before 4/17 (\$15) after 4/17 (\$20)

Canine \$15

Sleepwalker \$30

The undersigned, for myself, my heirs, my executors, administrators and assigns, do hereby release and discharge Sandy Rollman Ovarian Cancer Foundation, Inc. and its sponsors from any and all claims, demands, actions and/or causes of actions of any kind or character for injuries or damages sustained by me arising out of my participation in this event, including pre- and- post event activities. I attest and verify that I am sufficiently physically fit to participate in this event, and that I have no medical condition that prevents me from safely participating. I give full permission for the Sandy Rollman Ovarian Cancer Foundation, Inc. and their sponsors to use any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event.

**Runner/walker signature** \_\_\_\_\_

(If under 18, parent's signature) \_\_\_\_\_

**Return completed form and check to:** Sandy Rollman Ovarian Cancer Foundation, Inc., 2010 West Chester Pike, Suite 300, Havertown, PA 19083. Mail in registration must be received in the office by 4/21. On-line registration is available until 4/26. For details visit [www.sandyovarian.org](http://www.sandyovarian.org).

**Special Prizes to the Largest Corporate and Largest School Teams!**