



**Yes! I want to join the fight for a Lupus Cure. Sign me up for the 10K Walk**

For further questions or if you chose to register online visit us at [www.lupuswalkny.org/register.htm](http://www.lupuswalkny.org/register.htm)

Name \_\_\_\_\_

Sex \_\_\_\_\_ Age on race day \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

Company Name \_\_\_\_\_  
(If part of mailing address)

Mailing Address \_\_\_\_\_

Apt. No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Day) \_\_\_\_\_ (Eve) \_\_\_\_\_

E-mail \_\_\_\_\_

Team name \_\_\_\_\_  
(5 or more participants constitute a team. For more information about registering as a team visit [www.lupuswalkny.org/teams.htm](http://www.lupuswalkny.org/teams.htm))

**PLEASE CHECK ONE FEES**

- Registration fee \$20.00 (includes t-shirt)
- Late registration fee \$25.00 (on 8/7/03)
- I cannot participate, please accept my donation of \$ \_\_\_\_\_

**OTHER**

- Please call me to volunteer prior to event day
- I am living with Lupus.

**AGE DIVISIONS**

- 12 & under  13-18  19-29
- 30-39  40-49  50-59
- 60-69  70 & over

**T-SHIRT SIZE:**  Child Medium  Child Large  L  XL  XXL

**MAKE CHECKS PAYABLE TO**

Philadelphia Church

**MAIL TO**

Merlyn's Rainbow: Lupus Walk For A Cure  
c/o Philadelphia Church, PO Box 491  
Rockville Centre, NY 11570

**WAIVER**

*In consideration of my participation in the Merlyn's Rainbow: Lupus Walk For A Cure 2003, I on behalf of myself, my heirs, legatees, personal representatives, and all those claiming by me or through me, consent to hereby discharge and forever hold harmless Philadelphia Church of Universal Brotherhood, Inc. and all other sponsors, all municipalities whose property and/or personnel are used and any other sponsoring or co-sponsoring agencies or individuals from responsibility for any injuries or damages I may suffer as a result of my participation in this event.*

*I certify that I am physically able to participate in this event. In addition, I hereby consent to discharge and release the aforementioned sponsors from any liability whatsoever for the following use: any reproduction of my name, voice, likeness and any and all photographs, sketches, motion pictures, taken or made for use with this event or other events without obligation to me.*

*I certify that all information provided on this form is true and complete and that I will abide by the rules and instructions of the officials and the event management. I have read the entry information for the event and certify my compliance by my agreement below.*

Participant signature \_\_\_\_\_

Signature Date \_\_\_\_\_

(Parent or guardian if under 18) \_\_\_\_\_