

# BLUEGRASS AUTISM WALK 2011 REGISTRATION

- Saturday July 9 at Keeneland Race Course, 4201 Versailles Rd., Lexington KY -  
Registration and Vendor/Agency Fair begin at 8:30 a.m.; 2K Walk starts at 10:00 a.m.

Use this form to register by mail and pay by check; to register on-line and create a fundraising page, visit [www.bluegrassautismwalk.org](http://www.bluegrassautismwalk.org)

Name \_\_\_\_\_

Team Name (optional) \_\_\_\_\_

Address \_\_\_\_\_

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

e-mail \_\_\_\_\_ Phone (      ) \_\_\_\_\_

**Name of Adult Team Members (include yourself)**                      **T-shirt size\***


**Name of Child Team Members**    **T-shirt size\***


\* T-shirt sizes: Adults - S, M, L, XL, 2X, 3X; Children - YS, YM, YL

\*\*\*\*\* Use the back of this form to register more team members! \*\*\*\*\*

Number of adults registering \_\_\_\_\_ X \$20 = \_\_\_\_\_. (will be \$25 on-site)

Number of children registering \_\_\_\_\_ X \$10 = \_\_\_\_\_. (will be \$15 on-site)

**Total amount enclosed: \_\_\_\_\_ Please make check payable to ASBG.**

\*\*\*\*\* PLEASE SHARE OUR FACEBOOK EVENT PAGE: Bluegrass Autism Walk 2011\*\*\*\*\*

**Please send form and payment to: ASBG**

c/o Elise Kalika  
2192 Westmont Ct.  
Lexington, Kentucky 40513

If you have questions about registration, contact Elise Kalika ([dsk3305@insightbb.com](mailto:dsk3305@insightbb.com), or 859-223-0818)

**PLEASE SIGN AND DATE PAGE 2 >>>>**

The undersigned participant recognizes that he/she is voluntarily participating in the BLUEGRASS AUTISM WALK, sponsored and organized by the Autism Society of the Bluegrass. In so doing and by signing below and having read this release, the undersigned participant, on behalf of himself/herself, his/her heirs, legal representatives, agents, successors, and assigns, hereby assumes all risk associated with participating in the BLUEGRASS AUTISM WALK and agrees to indemnify and hold Keeneland and the Autism Society of the Bluegrass harmless from any loss or injuries resulting to the undersigned participant, and furthermore releases Keeneland Association, the Autism Society of the Bluegrass, and each of their officers, agents, directors, attorneys, employees, consultants, and all other persons, whomsoever, acting on its behalf, from all claims, losses, defenses, suits, or causes of action, whether based in equity or in law, including, without limitation, any claim for punitive or exemplary damages, and all other matters arising out of, by reason of, or in any way of related to, directly or indirectly, the undersigned participant's participation in the BLUEGRASS AUTISM WALK held at Keeneland on July 9, 2011.

The undersigned understands that photographs may be taken and/or videotaping may occur during this event, and agrees and consents to the use of such photographs and/or videotape which may include them during their participation in the BLUEGRASS AUTISM WALK held at Keeneland on July 9, 2011, and waives any demand or right to compensation and/or right of privacy which may otherwise be afforded them by the capture of their image(s) in such photographs and/or videotape during the BLUEGRASS AUTISM WALK.

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Print Name

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Names of Minor Children for whom you are signing

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Signature

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Date

**PLEASE DUPLICATE THIS PAGE FOR OTHER ADULT TEAM MEMBERS. THANKS!**