

2021 VIRTUAL March for Marrow 5K Run & Walk Texas YOUTH or STUDENT TEAM RATE Individual Registration

				hone:	
Daytime Phone: _				hone:	
Address:			City: _	State:	Zip:
Birthdate:		Sex: M	F	T-Shirt Size:	
school or Organizatio	n Team Name: _				
Walking/Running in	Honor of	Memory of:			
oss, damage and any a my of the sponsors or c	nd all claims or de otherwise in conne	emands on account ection with my part	t of any injury or o	Ilectively "sponsors") from all damage, whether caused by tent. I agree to the use of my	the negligence of all o
ncluding but not limite the control of the spon- and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE 18, HIS/HER PARENT OF ward has permission to	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the E	flood, acts of God e no refund of the bind the members the State of Texas OF LIABILITY AGR ST SIGN THIS RELEA	d or the elements entry fee or any c of my family and a. REEMENT AND VO ASE AND WAIVER	ent the Event is delayed or ca (including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h	ny other cause beyon intent that this Releas d personal representa CCIPANT IS UNDER AG is or her son/daughter
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover thave READ THIS RELE 18, HIS/HER PARENT OF ward has permission to liame:	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the E	flood, acts of God e no refund of the bind the members the State of Texas OF LIABILITY AGR ST SIGN THIS RELEA Event.	d or the elements entry fee or any c of my family and c. REEMENT AND VO ASE AND WAIVER	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTIAGREEMENT to certify that h	ny other cause beyon ntent that this Releas d personal representations or her son/daughter
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE 18, HIS/HER PARENT OF liverd has permission to Same: Student Discount	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the E	flood, acts of God e no refund of the bind the members the State of Texas a OF LIABILITY AGR ST SIGN THIS RELEA Event.	d or the elements entry fee or any coof my family and construction. REEMENT AND VO ASE AND WAIVER 1-21 yrs) \$1	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h Date:	ny other cause beyon intent that this Releas d personal representation of the control of the con
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE 18, HIS/HER PARENT OF liverd has permission to Student Discount Contribution Optic	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the E	flood, acts of Gode no refund of the bind the members the State of Texas of Figure 1997 of the State of Texas of Texa	d or the elements entry fee or any coof my family and cook and walver. ASE AND WAIVER. 4-21 yrs) \$1	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h Date:	ny other cause beyon intent that this Released personal representations or her son/daughten ALL \$10.00 wants to donate.
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE 18, HIS/HER PARENT OF liverd has permission to livere but the contribution optic Contribution optic COTAL AMOUNT:	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the E	flood, acts of God e no refund of the bind the members the State of Texas a OF LIABILITY AGR ST SIGN THIS RELEA Event. \$12.00 (14	d or the elements entry fee or any coof my family and state of the sta	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h	ny other cause beyon ntent that this Released personal representations or her son/daughter ALL \$10.00 wants to donate.
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE SA, HIS/HER PARENT OF LIVER DISCOUNT CONTRIBUTION OPTICE TOTAL AMOUNT: Credit Card #	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the Education (6-13 yrs) 5K: on (circle one):	flood, acts of God e no refund of the bind the members the State of Texas e OF LIABILITY AGR ST SIGN THIS RELEA Event. \$12.00 (14	d or the elements entry fee or any coof my family and is received. ASE AND WAIVER AND VOLUME ASE AND WAIVER AND WAIVER AND CONTROL OF THE CO	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h Date: L5.00; 1-2-MILE WALK heless student's parent was a masterCard Exp Date:	ny other cause beyon ntent that this Releas d personal representations or her son/daughter AG (ICIPANT IS UNDER AG) is or her son/daughter ALL \$10.00 wants to donate. VISA
ncluding but not limite the control of the spons and Waiver of Liability lives, and shall be gover HAVE READ THIS RELE 18, HIS/HER PARENT OF liverd has permission to Same: Contribution Optic FOTAL AMOUNT: Credit Card # Name as it appear	d to: fire, disaster, sors, there shall be Agreement shall be ned by the laws of ASE AND WAIVER GUARDIAN MUST participate in the Education (6-13 yrs) 5K: on (circle one): \$s on the card_	\$12.00 (14) \$12.00 (14) \$15 \$20 No	d or the elements entry fee or any coof my family and state of the coordinate of the	(including rain and hail), or a other costs. It is my express i spouse, my heirs, assigns an LUNTARILY SIGN IT. IF PARTI AGREEMENT to certify that h	ny other cause beyon intent that this Releas d personal representa ICIPANT IS UNDER AG is or her son/daughter , ALL \$10.00 wants to donate. VISA

MESSAGE FROM MIA HAMM, MEMBER, US WOMEN'S NATL SOCCER TEAM, 1987-2004: "Thanks for running or walking with my Mom. I know how I felt when I lost by brother Garrett —my hero. I am a Mother now and would not want to lose any of my children."



2021 VIRTUAL March for Marrow TX 5K Run and Walk

STUDENTS, 14-21 YEARS OLD

SATURDAY, MARCH 27 to APRIL 3, 2021 - Anytime - Anywhere in the World

www.marchformarrow.org; Questions??? march4marrowTX@gmail.com

5K STUDENT RUNNING or WALKING Teams – Sponsorships for Student-Runners Available – Phone 512-589-3735

SCHOOL:	COACH:	
WORK PHONE:	CELL PHONE:	
FAX:	EMAIL:	
NO. of STUDENTS RUNNING:	NO. of STUDENTS WALKING:	
STUDENT SPONSORSHIPS AVAILABLE - Call 512-301-5	5 029	INDIVIDUAL RUNNERS or WALKERS
Team of 5 Runners ages 14-21 (\$15)\$75.00 Team of 10 Runners age 14-21 (\$15)\$150.00	Team of 5 Walkers ages 14-21 (\$10)\$ 50.00 Team of 10 Walkers age 14-21 (\$10)\$100.00	5K Runners: All STUDENTS ages 14-21 normal rate\$20.00
- · · · ·	<u> </u>	Walkers: All STUDENTS ages 14-21 normal rate\$15.00

*T-SHIRT Youth Adult - S M L XL XXL XXXL

Walk or	Name	Age on	Gender	Cell Phone	Email	*T-Shirt	**Student or Parent Signature
Run		Race Day	M/F			Size	(Read Waiver Below)

MAKE CHECKS PAYABLE TO: Aplastic Anemia MDS International Foundation, Inc. 4330 East-West Hwy, S. 230, Bethesda, MD 20814 *Must be postmarked by Friday, March 19, 2021* in order to ensure t-shirts etc. FAX: 512-233-5153 Phone Stephanie Dillon Hamm at 512-301-5029 or 512-589-3735 or march4marrowtx@amail.com.

**WAIVER

In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the Aplastic Anemia MDS International Foundation, Inc. the sponsors, and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Texas.

□ I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT to certify that his or her son/daughter/ward has permission to participate in the Event.



2021 VIRTUAL March for Marrow TX 5K Run and Walk

YOUTH, 6-13 years old; STUDENTS, 14-21 years old

SATURDAY, MARCH 27 to APRIL 1, 2021 - Anytime – Anywhere in the World www.marchformarrow.org; Questions??? march4marrowTX@gmail.com

PAGE 2, 3, 4 - 5K Student Running or Walking Team - Student Rates Apply - Page 2

*T-SHIRT Youth Adult - S M L XL XXL XXXL

arent Signature	**Student or Parent	*T-Shirt	Email	Cell Phone	Gender	Age on	Name	Walk or
iver Below)	(Read Waiver B	Size			M/F	Race Day		Run
_								

**WAIVER

In consideration of the acceptance of this registration entry, I assume complete responsibility for any injury or accident which may occur during my participation in this race or while on the premises of this event. I am fully aware of the risks and hazards inherent in participating in the Event and elect to voluntarily participate. I fully realize, waive, hold harmless and covenant not to sue the Aplastic Anemia MDS International Foundation, Inc. the sponsors, and all other persons and entities associated with this event, together with their officers, directors, shareholders, successors and assigns (collectively "sponsors") from all liability, for any and all loss, damage and any and all claims or demands on account of any injury or damage, whether caused by the negligence of all or any of the sponsors or otherwise in connection with my participation in the Event. I agree to the use of my name and photograph in broadcasts, newspapers and other media without compensation. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, disaster, flood, acts of God or the elements (including rain and hail), or any other cause beyond the control of the sponsors, there shall be no refund of the entry fee or any other costs. It is my express intent that this Release and Waiver of Liability Agreement shall bind the members of my family and spouse, my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Texas.

□ I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT AND VOLUNTARILY SIGN IT. IF PARTICIPANT IS UNDER AGE 18, HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT to certify that his or her son/daughter/ward has permission to participate in the Event.