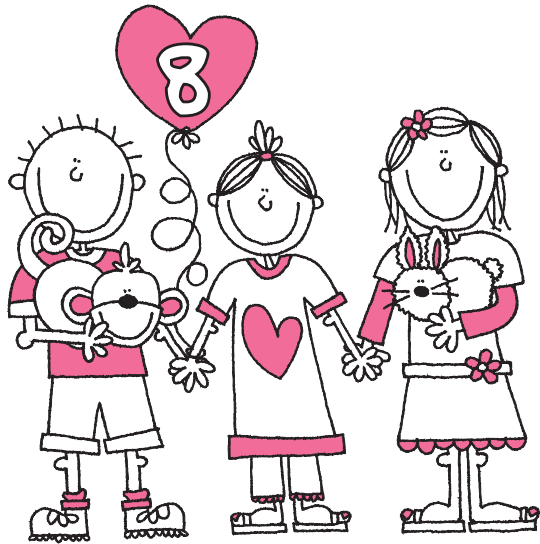




**8th Annual Hope in Grace
Family Fun Run/Walk**
April 1, 2017 at 2:00 pm
Lakeside Commons Park
Blaine, MN



**Help us continue our quest to support
pediatric cardiology research**

2:00pm Registration, Children's Activities &
Silent Auction

3:15pm 5K run/2 mile walk

Questions or comments?
jadlyn@hopeingrace.org or 763-785-6919

Visit our website at www.hopeingrace.org for
current information and details on our event, including
additional ways to register and donate.

Registration Form

Participation for child (12 years and younger) is INCLUDED with the registration of a supervising adult. Please record only adult participant names on registration form. Children's T-shirts are not included in the registration but can be purchased for \$10 each.

Adult Participant Name(s): _____

Adult T-shirt sizes: S-XXL

1. _____

Preferred T-shirt size: _____

2. _____

Preferred T-shirt size: _____

3. _____

Preferred T-shirt size: _____

4. _____

Preferred T-shirt size: _____

Contact Phone Number _____

E-mail address _____

Minimum donation before March 17:
\$25/adult (T-shirt included).

After March 17 including same-day
registration:
\$30/adult (T-shirt while supply lasts).

Additional T-shirts needed:

Youth: XS ___ S ___ M ___ L ___ XL ___

Adult: S ___ M ___ L ___ XL ___ XXL ___

Total Quantity ___ x \$10 = ___

TOTAL Donation Amount \$ _____

I'd like to donate, but won't be able to
attend/participate in the event: _____

Please make checks payable to: **Hope in Grace**

Mail check and registration form to:

Hope in Grace
PO Box 490581
Blaine, MN 55449

LIABILITY WAIVER

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

Hope in Grace Family Fun Run Waiver and Release ASSUMPTION OF RISK AND WAIVER OF LIABILITY I understand that there is an inherent risk of injury, whether caused by me or someone else, in my participation in the Hope in Grace Family Fun Run (the "Event") and/or presence at the Event. This risk includes, but is not limited to: 1) Injuries arising from participation in supervised or unsupervised activities and programs at the Event or related to the Event, to the extent sponsored or endorsed by Hope in Grace; 2) Injuries arising from the use of any equipment, including any accidental or "slip and fall" injuries; 3) Injuries or medical disorders resulting from exercise, including, but not limited to heart attacks, strokes, heart stress, sprains, broken bones and torn muscles or ligaments; and 4) Injuries resulting from the actions taken or decisions made regarding medical or survival procedures. I understand and voluntarily accept th risk. I agree to specifically assume all risk of injury, whether physical or mental, as well as all risk of loss, theft or damage of personal property while present at the Event. I waive any and all claims or actions that may arise against Hope in Grace, as well as its directors and/or volunteers as a result of any such injury, loss, theft or damage to any such person, including and without limitation, personal, bodily or mental injury, economic loss or any damage resulting from the negligence of Hope in Grace or anyone else participating in the Event. If there is any claim by anyone based on any injury, loss, theft or damage that involves me, I agree to defend Hope in Grace against such claims and pay Hope in Grace for all expenses relating to the claim, and indemnify Hope in Grace for all obligations resulting from such claims. I certify that I have not been advised against participating in the Event or a similar level of activity by a qualified health professional. I voluntarily agree to and accept this Assumption of Risk and Waiver of Liability.

X _____

Signature of Registrant

Date: