

SATURDAY May 16th, 2020 12:00 p.m. - 3:00 p.m. Core Creek Park Langhorne, PA

REGISTRATION IS REQUIRED BY MAY 11th

*(Due to new Core Creek Park Regulations)

PLEASE REGISTER BY MARCH 31st TO ENSURE A T-SHIRT

Copy This Form As Needed - Please Print

Last Name:	First Name:
Street Address:	
City:	State:Zip:
Phone:Email: _	
Team Name (if any): Teams consist of 10+ registered walkers	T-SHIRT SIZE(s) - Please Write Quantity
Register Walkers	Adult Sm: Child XS:
# of Adults:x \$20 ea. = \$	
# Children: x \$10 ea. = \$	Adult Lg; Child Med: Adult XL: Adult 2XL: Adult 3XL: Adult 4XL
Total: \$ BUDDY WALK DONATIONS I cannot attend but would like to make a donation in the amount of: \$100 \$50 \$25 Other: \$	Checks are Payable to: Hopes and Dreams Foundation, Inc Please complete and mail with your payment to: Hopes & Dreams Foundation. Inc.
representatives-assume any and all risks which might be associate Dreams Foundation, Inc., its officers, employees, sponsors, organiz injuries or damages of any kind whatsoever suffered by myself and authorize the use by the Hopes and Dreams Foundation, and the Na	rmitted to participate in the Buddy Walk, I hereby-for myself, my heirs and personal ed with the event. I further waive, release, discharge and covenant not to sue Hopes and zers, volunteers or other representatives or their successors and assigns, for any and all for my minor child as a result of taking part in the events and any related activities. I also ational Down Syndrome Society of any photo, film or videotape taken of me or my minor the event for any purpose.
Signature:	Date:

(Registration is not valid without signature)