Registration Information	Save time Register online at <u>www.HopeAlaska.org</u>
Name	\$30 Registration Fee Required
Mailing Address City, State Zip	WAIVER: I hereby waive all claims against Hope Community Resources, sponsors or any personnel for any injury I may suffer during this event. I understand that it is my responsibility to utilize protective equipment when necessary. I agree to abide by all city ordinances, including the Bike Helmet law requiring all riders under 16 wear a helmet when operating a bicycle. I grant full permission to Hope to use photographs, video and other media of me in legitimate accounts and promotions of this event.
Daytime Phone Team Name (if applicable)	Participant Signature (Parent/Guardian signature required if under 18)
E-Mail Address	
Connection to Hope (i.e. employee, family member, volunteer, etc.)	

Pledge Form		Please make checks payable to "Walk for Hope"
Sponsor	Sponsor's Address and Phone	Pledge Amount Information
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		Total Pledges Collected: \$

