DC FRONT RUNNERS
10:00 am, Saturday, October 21, 2006
23rd & P streets NW

Pledge Run/Walk to Benefit the Lesbian Services Program
of the Whitman-Walker Clinic

dc front runners	WHITMAN-WALKER CLINIC

_____ is planning to run ___ walk ___ for a distance of 3 miles.
Please print your name Please check one

The predicted time to cover this distance is _____ minutes and _____ seconds.

The individuals below have pledged contributions to the LSP [please make the tax-deductible checks payable to "Lesbian Services Program"] in the amounts indicated. If the finishing time is within 30 seconds of the predicted time, they will give the extra amount indicated.

Name of donor	**Amount Pledged/Contributed**	**Bonus Amount** [Optional]

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Waiver and disclaimer

I know that running, walking, and volunteering to work in races are potentially hazardous activities and that I should not enter or participate in such activities unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete a run. I assume all risks associated with running and volunteering to work at this race including, but not limited to falls, contact with other participants, the effects of the weather, including high heat or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration by your acceptance of my application for participation in this event, I, for myself, and anyone entitled to act on my behalf, waive and release DC Front Runners and International Front Runners, and all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this activity even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. Further, I hereby grant full permission to any of the foregoing to use my name and any photographs, videotapes, and any other record of this event for any legitimate purposes.

Signature _____ Date _____