



August 1, 2020 to August 31, 2020

A month of activities and prizes to celebrate the lupus community and support the LSI

Registration Form

Name (complete one registration form per participant)

T-Shirt Size (Adult: S, M, L, XL, 2XL, 3XL, 4XL / Child: S, M, L)

Mailing Address

City

State

Zip

Date of Birth (required for under 18)

Phone

Email

Employer (ask about matching gifts!)

Title

- Start a team, team name: _____
- Join a team, team name: _____
- Walk as an individual
- I cannot attend but would like to make a donation (*complete information below*)
- Walk for a region (select one): Southern Suburbs Western Suburbs Chicago

Remember to Sign the Waiver on the Back!

Registration Fee(s) *Includes an Illinois Lupus Walk T-Shirt

- Adult Walker - \$25 Child - \$10 (*12 years and under*) Additional Donation \$ _____
- Check Enclosed (*Please make checks payable to LSI*)
- Please charge my credit card \$ _____

Visa MasterCard Discover AMEX

Name on Card _____

Card # _____

Exp. Date _____ CRV # _____ (3 digits on back)

Billing Address _____

City

State

Zip

PLEASE RETURN FORM TO:

Lupus Society of Illinois

Attn: Virtual Walk

411 S. Wells St, Suite 503

Chicago, IL 60607

Or

Fax: 312-255-8020

**Lupus Society of Illinois
General Release and Waiver**

For good and valuable consideration, including my and my minor child(ren)'s voluntary participation in the Lupus Society of Illinois virtual fundraising walk (the "Event"), I, personally, and on behalf of, and as parent or legal guardian of, the minor child(ren) identified below, and on behalf of anyone acting on my behalf or on behalf of my minor child(ren), including, but not limited to attorneys, representatives, agents, heirs, executors, administrators, assigns, insurers, or any other person or entity asserting claims through me and/or my child(ren), agree to release, indemnify, defend, hold harmless and forever discharge the following persons and entities:

The Lupus Society of Illinois, Inc. ("LSI") and all of its respective directors, officers, shareholders, members, managers, partners, board members, agents, representatives, employees, subsidiaries, successors, parents, heirs, executors, administrators, representatives and affiliates (collectively, the "Releasees"), from and against any and all claims, suits, losses, damages, judgments, expenses, costs, and liabilities (including, without limitation, reasonable attorney, expert witness and court reporter fees and court costs and expenses), which hereinafter may accrue or arise against the Releasees and which in any way arise out of or are in any way related to (a) my or my minor child(ren)'s participation in and/or presence at the Event, and (b) the use of my and/or my minor child(ren)'s name, image, likeness and/or quotations in media platform, including, but not limited to, print, television, radio, mobile and the Internet, in any advertisement or promotion or fundraising effort relating to or supporting LSI.

I HAVE FULLY READ THIS RELEASE AND WAIVER, AND HAVE BEEN FULLY INFORMED REGARDING THE EVENT AND ANY QUESTIONS I HAD REGARDING THE EVENT OR THIS DOCUMENT HAVE BEEN ANSWERED.

I UNDERSTAND THAT PARTICIPATING IN THE EVENT THAT IS ORGANIZED AS A VIRTUAL ACTIVITY WHERE I WALK ON MY OWN, AT A DATE AND TIME OF MY CHOOSING, IN A LOCATION AND WALKING ROUTE OF MY CHOOSING, WHICH WILL NOT HAVE ANY SUPPORT OR SECURITY MEASURES IN PLACE BY LSI, IS A POTENTIALLY HAZARDOUS ACTIVITY, WHICH COULD RESULT IN PERSONAL INJURY OR DEATH. I ACKNOWLEDGE THAT I AM PARTICIPATING IN THE EVENT OF MY OWN FREE WILL AND MY OWN PERSONAL RISK. I AGREE TO FOLLOW ALL PEDESTRIAN SAFETY ORDINANCES WHILE PARTICIPATING IN THE EVENT.

I AGREE THAT WHILE PARTICIPATING IN THE EVENT I WILL ABIDE BY THE CENTER FOR DISEASE CONTROL'S ("CDC") RECOMMENDATIONS FOR THE PREVENTION OF THE SPREAD OF THE 2019 NOVEL CORONAVIRUS DISEASE (COVID-19) AND OTHER COMMUNICABLE DISEASES AND I HAVE READ THE CDC'S GUIDANCE AT: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html>. I FURTHER AGREE THAT IF MY COMMUNITY HAS A SHELTER IN PLACE ORDER, I WILL ONLY PARTICIPATE IN THE EVENT IN COMPLIANCE WITH THE TERMS OF SUCH ORDER.

I UNDERSTAND THE POSSIBILITY AND RISKS TO MY PERSONAL PROPERTY THAT MIGHT RESULT FROM MY PARTICIPATING IN AND/OR BEING PRESENT AT THE EVENT.

I ASSUME ANY AND ALL RISK THAT IS IN ANY WAY ASSOCIATED WITH, RELATED TO OR OCCURS AS A RESULT OF MY OR MY MINOR CHILD(REN)'S PARTICIPATION IN AND/OR BEING PRESENT AT THE EVENT.

I HEREBY GIVE RELEASEES OR ANY ONE OF THEM IRREVOCABLE PERMISSION TO USE MY AND/OR MY CHILD(REN)'S NAME, IMAGE, LIKENESS AND/OR QUOTATION ON THE INTERNET AND/OR IN ANY OTHER MEDIA PLATFORM FOR PURPOSES OF ADVERTISEMENT, PROMOTION OR FUNDRAISING, AND AGREE THAT I AND MY CHILD(REN) SHALL NOT BE ENTITLED TO ANY COMPENSATION FOR SUCH USE.

Signature or Parent/Guardian Signature

Print Name

Date

Child(ren)'s Name(s) if under 18