



Support The Effort To Provide Shelter

(S.T.E.P.S)

Walk-a-thon Registration Form

(Registration will be accepted on the Walk day)

Last Name: _____ MI: _____
First Name: _____ Sex: M F
Street Address: _____
City: _____ State: _____ ZIP: _____
Day Phone: (____) _____ Age on race day: _____

**SEND REGISTRATION
AND ENTRY FEE TO:**

Jesus House DC
919/921 Philadelphia Ave
Silver Spring MD 20910
(301) 650 1900

Entry Fee: (Check One)

\$5: Walk with t-shirt

\$_____ Additional Donation to S.T.E.P.S

\$_____ Total (Registration fees are non-refundable)

RACE WAIVER OF LIABILITY (Participant must sign) I understand that my consent to these provisions is given in consideration of the acceptance of this registration and for being permitted to participate in this event. I am a voluntary participant in this event, and in good physical condition. I hereby assume full and complete responsibility for any injury or accident which may occur during my participation in this event or while on the premises of this event. I release Jesus House DC, the Census Bureau and any other sponsors/entities affiliated with this walk from any claim that I might have arising out of my participation in this event.

Signature of participant or parent / guardian if under 18

Date