



FAMILY FUN WALK REGISTRATION FORM

Co-op Bank **Pump it Up!** Fun Walk

CARRIACOU: Sunday April 2, 2017 from the Harvey Vale Playing Field to Hillsborough Tennis Court
 GRENADA: Sunday, April 23, 2017 at 4:00 p.m. from the Morne Rouge Playing Field to the National Stadium.

REGISTRATION PERIOD: MARCH 6, 2017 TO APRIL 21, 2017 OR WHILE STOCKS LAST

2017 **Pump it Up!** beneficiary: **Fund for the re-establishment of the Carlton Home**

REGISTRATION INFORMATION:

1. Registration fee: \$20 per individual walker: \$15 per person in groups consisting 3 or more
2. Registrants will receive: T-shirt
3. List participants on reverse.
4. Complete all areas of the Registration Form.
5. Full payment is to be made when submitting forms at Co-op Bank branches.
6. Payments: Cheques are to be made payable to "Grenada Co-operative Bank Fun Walk". There would be no refunds or transfers;
7. Call 444-2667 for further information.

PLEASE COMPLETE ALL RELEVANT AREAS OF THIS FORM

ARE YOU REGISTERING AS: AN INDIVIDUAL A GROUP

FOR GROUPS, ENTER THE NAME OF THE GROUP COORDINATOR

GROUP NAME:

GROUP TYPE: FAMILY WORK SCHOOL COMMUNITY CHURCH

TOTAL NO. OF EMPLOYEES (WORK GROUP ONLY): 1-10 (MICRO) 11-49 (SMALL) 50-99 (MEDIUM) 100+ (LARGE)

LAST NAME:

BIRTH (MM/DD/YY):

FIRST NAME:

ADDRESS:

PHONE:

EMAIL:

ROUTE: NORMAL CHALLENGE

INDIVIDUAL: MALE FEMALE SHIRT SIZE: S M L XL XXL XXXL

CH (2/4) CH (6/8) CH (10/12) CH (14/16)

PARTICIPATION: ON FOOT WHEELCHAIR STROLLER

NUMBER OF PERSONS REGISTERED _____ PAYMENT: \$ _____

TYPE OF PAYMENT: CHEQUE CASH CARD

I WOULD LIKE TO MAKE A DONATION TO **the fund for the re-establishment of the Carlton Home** IN THE AMOUNT OF:

\$ _____

REQUIRED:

I/WE HEREBY WAIVE ALL CLAIMS AGAINST THE GRENADA CO-OPERATIVE BANK LIMITED AND ALL ITS ALLIANCE PARTNERS ASSOCIATED WITH THIS EVENT, FOR INJURY OR LOSS I/WE MIGHT SUFFER BY PARTICIPATION IN, OR AS A RESULT OF THIS EVENT. I/WE GRANT PERMISSION TO EACH OF THE FOREGOING TO USE MY/OUR NAME, IMAGE, PHOTOGRAPHS, VIDEOTAPES AND ANY OTHER MEDIA OR RECORD OF THE EVENT FOR LEGITIMATE PURPOSES, INCLUDING PROMOTIONS WITHOUT COMPENSATION TO ME/US. I/WE ACKNOWLEDGE THAT THE GRENADA CO-OPERATIVE BANK LIMITED HAS THE RIGHT TO ALTER, CHANGE, CANCEL AND OR POSTPONE THE EVENT AT THEIR SOLE DISCRETION. I/WE WARRANT THAT ALL STATEMENTS MADE IN THIS AGREEMENT ARE TRUE AND CORRECT AND I/WE UNDERSTAND THAT THE ORGANIZERS HAVE RELIED ON THEM IN ALLOWING ME TO PARTICIPATE IN THE EVENT.

I/WE HAVE READ THE FOREGOING, UNDERSTAND ITS CONTENTS AND INTENTIONALLY AND VOLUNTARILY CERTIFY COMPLIANCE BY ACCEPTING THIS WAIVER.

 Signature of Participant/Group Representative or
 Parent/Legal Guardian (if Participant is under 18 yrs)

 Date

