



Brattleboro, VT  
2024 Registration Form

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail \_\_\_\_\_

**No registration fee necessary.**

Thanks to the generous support of our sponsors and other contributors, this year's event is

**FREE.**

If you would like a free t-shirt, please indicate which size you would like.

Adult: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_

Child: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_

Limited availability for orders placed after September 1<sup>st</sup>

I would like to make a donation payable to "Special Olympics VT" in the amount of \$ \_\_\_\_\_

**Waiver for walkers:**

In consideration of me and/or my minor child being permitted to participate in the Buddy Walk, I hereby-for myself, my heirs and personal representatives-assume any and all risks which might be associated with the event. I further waive, release, discharge, and covenant not to sue "Brattleboro Buddy Walk" or any of the organizers, sponsors, volunteers or other representatives or their successors and assigns, for any and all injuries of damages of any kind whatsoever suffered by myself and/or my minor child as a result of taking part in the events and any related activities. I also authorize the use by the organizers of this event of any photo, film or videotape taken of me or my minor child at the event for any purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_