**San Diego Race for Autism 2010** 5K Run/Walk and 1-Mile Family Walk March 27, 2010 ~ Balboa Park

## $\pmb{Registration\ Form\ (All\ registrants\ must\ complete)}\\$

	Please	use	<b>ONE form</b>	per	person
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RA	CE FOR AUTISM
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	SAN DIEGO

First Name		Last Name				
Address (Street) /Apt. #						
City					State Zi <sub>I</sub>	Code
-	-	M F				
(Area Code) Phone Num	ber - Daytime	Gender	Age		e of Birth (MM-DD-	YYYY)
			(on March 27, 2010	) 		
Email Address (Please m	ake sure it is readab	le and corre	ct – it will be us	ed to send you ra	ace details/instruction	ons)
Shirt Size	Select One:	I am an/a:			Registra	<u>tion</u>
☐ Youth (Medium)	□ 5K Run	☐ Individu	ual with Autism/	ASD	Adult (See Table)	\$
☐ S-Adult	☐ 5K Walk/Run	☐ Parent o	of individual with	Autism/ASD	Child (under 12)	\$
☐ M -Adult	□ 1-M Walk	☐ Relative	e of individual w	ith Autism/ASD	XXL Shirt \$ 2.00	\$
☐ L- Adult		☐ Friend o	of individual with	n Autism/ASD	Additional Donation	\$
□ XL – Adult		☐ Professi	ional in the field	of Autism		
□ XXL- Adult (\$2 Extra)		☐ Other:			Total	\$
Mail completed registration forms and payment to:  National Foundation for Autism Research PO BOX 502177 San Diego, CA 92150-2177  Please make check payable to: National Foundation for Autism Research National Foundation for Autism Research						
To Pay with a Credi		ur registrati	ion on-line at W	ww.Racefor	Autism.org	
RACE RELEASE (MUST BE SIGNED BY PARTICIPANT OR APPLICATION WILL BE REJECTED): 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 herby assume full and complete responsibility for any injury or accident which may occur during my participation in this event and I hereby release and hold harmless and covenant not to file suit against the National Foundation for Autism Research and any affiliated individuals, the San Diego Race for Autism and any affiliated individuals, the City of San Diego and all governmental agencies whose property and/or personnel are used, and all other persons or entities associated with this event (the "Releasees") from any loss, liability, damage, or claims I may have arising out of my participation in this event, including personal injury or damage suffered by me or others. I give my full permission to the National Foundation for Autism Research to use any photographs, videotapes, or other recordings of me that are made during the course of this event. I also give my full permission for such first aid as deemed necessary to be provided to me or my child on the premises or prior to transport to a hospital for further treatment.						
Signature of Par	ticipant or Guard	ian		T	oday's Date	
For Team Participation	on (if applicable)			I want to	learn more abou	ı <b>t</b>
Team Name				Organizing a T	eam	
Team Captain				Volunteering for	or the Race	
Organization				Becoming a Co	orporate Sponsor	

### San Diego Race for Autism 2010

5K Run/Walk and 1-Mile Family Walk March 27. 2010 ~ Balboa Park

# **Registration Form** (All registrants must complete) **Please use ONE form per person**



#### **Instructions**

Each individual needs to fill out and sign a registration form.

Families – Please fill out a form for each person participating in the San Diego Race for Autism event. You can send in one check for the whole family.

If you want to pay by credit card, please use our on-line registration at www.RaceforAutism.org.

It is easy and secure and allows you to have your own fundraising webpage.

Please note the fee schedule below.

	FEE SCHEDULE	ADULTS	CHILDREN (12 years & under)	
Super Saver	Before February 1, 2010	\$ 20.00	\$ 10.00	
Early	Before March 1, 2010	\$ 25.00	\$ 10.00	
Standard	Before March 20, 2009	\$ 30.00	\$ 15.00	
Late	After March 21 and Race Day	\$ 35.00	\$ 20.00	

All advanced registration (post marked before March 21) participants will receive an official event T-shirt. T-Shirt availability may be limited for LATE/Race Day registrations.

**REGISTER EARLY TO SAVE!** 

Mail completed registration forms and payment to:

National Foundation for Autism Research PO BOX 502177 San Diego, CA 92150-2177