San Diego Rac 5K Run/Walk and 1-M March 26, 2011 ~ Ball Registration F Please use ONE	<i>file Famil</i> boa Park O <mark>RM</mark> (Al	y Walk l registra	ants must c	complet	e)		F	ACE FO	AUTISM
First Name			L	ast Name					
Address (Street) / Apt. #							I		
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(Area Code) Phone Number - D		Gender	Age		Date	e of B	irth (N	/M-DD-	YYYY)
			(on March 26, 2011))
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	et One:	I am an/a:			,			Registrat	
	5K Run	□ Individual with Autism/ASD				Adult (See			\$
					SD	Table) $\ensuremath{\oplus}$ Child (under 12)\$			\$
□ M -Adult □					ASD	XXL Shirt \$ 2.00 \$			
🗖 L- Adult		□ Friend of individual with Autism/ASD				Additional \$			\$
🗖 XL – Adult		Professi	ional in the field of Autism						
$\square \begin{array}{c} XXL- Adult \\ (\$2 Extra) \end{array}$		• Other :					Total \$		
Mail completed registration for National Foundation for PO BOX 502177 San Diego, CA 92150-2	Autism Resear	ch	Please make National Fou	indation fo	r Autis	sm Ro	_		
To Pay with a Credit Card	1: Please use of	ur registrati	ion on-line at W	ww.Rac	efor	Aut	ism.	org	
RACE RELEASE (MUST BE SIG consent to these provisions is given in I am a voluntary participant in this ev accident which may occur during my the National Foundation for Autism H City of San Diego and all governmen this event (the "Releasees") from any personal injury or damage suffered by photographs, videotapes, or other rec aid as deemed necessary to be provid	n consideration o vent, and in good participation in t Research and any tal agencies who v loss, liability, da y me or others. ordings of me tha	f the acceptan physical cond this event and a filiated ind se property ar amage, or clai I give my full at are made du	the of this registrati dition. I herby assure I hereby release ar ividuals, the San D nd/or personnel are ms I may have ariss permission to the I uring the course of	ion and for b me full and c nd hold harm viego Race for used, and al ing out of m National Fou this event. I	eing per omplet less and r Autis l other p y partic ndation also giv	rmitted e respond cove m and person ipation for A we my	d to par onsibili nant no any aff s or ent n in this utism F full per	ticipate in ty for any to file s filiated in tities asso s event, i Research rmission	n this event. 7 injury or uit against dividuals, the ciated with ncluding to use any for such first
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National Foundation for Autism Research

(858) 679-8800

San Diego Race for Autism 2011 5K Run/Walk and 1-Mile Family Walk March 26, 2011 ~ 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, 2011	\$ 20.00	\$ 10.00		
Early	Before March 1, 2011	\$ 25.00	\$ 10.00		
Standard	Before March 19, 2011	\$ 30.00	\$ 15.00		
Late	After March 20 and Race Day	\$ 35.00	\$ 20.00		

All advanced registration (post marked before March 20) 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