

2015 Rady Children's Hospital Family Walk at SeaWorld Entry Form



When: Sunday, October 4, 2015 | 7:30 a.m. SHARP!
Where: Rose Marie Starns South Shores Park on Mission Bay
What: 3-mile family walk through SeaWorld and along San Diego's Mission Bay

Highlights:

- Participants receive **50% off admission to SeaWorld** (valid 10/4/15 to 10/11/15)
- Scenic, flat walk route through SeaWorld and along Mission Bay
- Colorful event T-shirt
- Exciting fundraising program with an opportunity to earn great prizes
- Great post-walk refreshments
- Fun entertainment along the route and at the finish
- A benefit for Rady Children's Hospital-San Diego

Wheelchairs and strollers are welcome. Please leave your pets at home.

SAVE TIME - SIGN UP ONLINE AT: www.RadyChildrensWalk.org

Rady Children's Hospital Family Walk at SeaWorld Official Entry Form Okay to photocopy. Please print clearly. Rain or shine. Sorry, no refunds.

Questions? Please call In Motion at 760.692.2900 or email info@inmotionevents.com

I am the Team Captain (check if applicable) I'm unable to make it to the event but want to register as a virtual walker
 Would you like to join our Rady Walk VIP (Very Important Patient) Club for current and past RCH patients? Yes No, thanks

First Name: _____ Last Name: _____
 Team Name (if applicable): _____
 Gender: Male Female Age on 10/4/15 _____ D.O.B:(MO/DAY/YR) _____ Phone: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Email Address: _____
 T-Shirt Size (Check one box) Youth Size: 2-4 6-8 10-12 14-16 Adult Size: SM MED LRG XL 2XL

Entry Fees: Check appropriate boxes

Adult Entry:
 Postmarked on or before 7/31/15 \$30
 Postmarked 8/1/15 to 10/1/15 \$35
 After 10/1/15 (including event day) \$40
Junior Entry: (Age 4 - 13)
 Postmarked on or before 7/31/15 \$19
 Postmarked 8/1/15 to 10/1/15 \$24
 After 10/1/15 (including event day) \$29
Child Entry: (Age 3 and under) \$10

I'm including donations I've collected in the amount of \$ _____

I'm including an additional personal donation in the amount of \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Make check payable to:

Rady Children's Hospital Foundation or
 Charge to credit card:
 Card No. _____

Exp. date (MO/YR): _____ / _____ CV# _____

Mail to: Rady Children's Hospital Family Walk
 C/O Rady Children's Hospital Foundation
 3020 Children's Way, MC 5005
 San Diego, CA 92123

EVENT CONSENT AND RELEASE (MUST SIGN IN ORDER TO PARTICIPATE IN EVENT):

clicking on "I Agree," you agree, warrant and covenant as follows:
EVENT CONSENT AND RELEASE (MUST AGREE IN ORDER TO PARTICIPATE IN EVENT): For and in consideration of my and/or my child's participation in the Rady Children's Hospital Family Walk at SeaWorld to be held on Sunday, October 4, 2015 (the "Event") at or near Sea World, San Diego, CA ("Sea World"), I, the undersigned, on behalf of myself and/or as parent/legal guardian of a minor child participant, do hereby agree as follows:

I agree that Sea World LLC, Rady Children's Hospital-San Diego, Rady Children's Hospital Foundation-San Diego, and Rady Children's Hospital and Health Center, City of San Diego, and In Motion, Inc., their parents, subsidiaries, related and affiliated entities, officers, directors, partners, shareholders, employees, agents and all related sponsors, vendors, volunteers and staff (hereinafter collectively referred to as "Released Parties") shall not be responsible or legally liable for any loss of real or personal property, or any bodily injury, including death, incurred or suffered by me and/or my child as the result of participating in the Event or presence at Sea World or my participation in the Event. I agree to RELEASE, WAIVE and forever DISCHARGE the Released Parties for any and all claims, loss, demands, damages, costs, expenses, lawsuits, causes of action and judgments that I and/or my child, may have, or claim to have arising out of or in any way connected with participation in the Event or presence at Sea World, whether caused by the NEGLIGENCE of the Released Parties or otherwise (other than gross negligence or intentional torts). Additionally, I agree to INDEMNIFY, DEFEND and HOLD HARMLESS the Released Parties from any and all claims, loss, demands, damages, costs, expenses (including attorneys' fees) for loss of real or personal property and/or bodily injury, including death, resulting from my and/or my child's participation in the Event or presence at Sea World.

I hereby give my consent for medical treatment should I and/or my child be involved in an accident and/or health-damaging situation while participating in the Event or while present at Sea World. I agree that I am at least 18 years of age or if not, that my parent or legal guardian is signing this Consent and Release ("Release") on my behalf. I acknowledge that the Event has inherent risks and I voluntarily and knowingly assume all risks related to participation in the Event.

I hereby agree that all photographs, video tapes, and/or audio tapes taken or recorded of me and/or my child by Released Parties, in connection with my participation in the Event, and in connection with any publicity and/or promotional appearances relating thereto, shall be the exclusive property of Released Parties and may be published, reproduced, exhibited, broadcast, televised, copyrighted, sold, assigned and used in any manner whatsoever without further consent from or payment to the undersigned who hereby forever releases and discharges the Released Parties from any claims, actions, damages, or demands whatsoever by reason of any such use. This Release shall be binding on all of my and/or my child's heirs, executors, administrators, representatives, next of kin, successors, beneficiaries and/or assigns.

I agree that my entry fee is non-refundable and that if the Event is cancelled due to weather or other extreme circumstances, my entry fee will be used as a donation to Rady Children's Hospital - San Diego.

I agree that this Release shall be interpreted in accordance with the laws of the State of California, is intended to be as broad and inclusive as permitted by law, and that if any term or provision of this Release shall to any extent be held invalid or unenforceable, the remaining terms of the Release shall not be affected thereby, but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same economic purposes and intention of the valid provision.

I agree that any controversy or claim arising out of or relating to my and/or my child's participation in the Event or presence at Sea World hereto shall be resolved by binding arbitration in accordance with the Commercial Arbitration Rules for the American Arbitration Association at any arbitration hearing to be held in San Diego, California. Any award issued by an arbitrator(s) may be entered and enforced by a court of competent jurisdiction in San Diego, California.

Signature: _____ **Date:** _____
 (IF UNDER 18 YEARS OF AGE, SIGNATURE OF PARENT/LEGAL GUARDIAN IS REQUIRED)