



www.campcedaridge.org

Zoo Walk 2011 Registration Form

Name: _____

Address: _____ City _____ State _____ Zip _____

Phone #: _____ Alternate Phone #: _____

E-mail Address: _____ # of Walkers: _____

Names & Ages (if under 18 of Walkers): _____



Did ya hear?

It's a fundraiser to help send kids to camp!

_____ # of lunches x \$9.00 = _____

_____ # of adults x \$28.00 = _____

_____ # of children x \$12.00 = _____

_____ # of children 4 and under _____

Total = _____ (Family Max \$85.00)

**Check payable to:
Huron Forest Camp CedarRidge**

I understand that this activity involves walking outdoors which may include risks such as falls or weather effects. I hereby assume all risks involved with this activity and agree to hold Huron Forest Camp CedarRidge, its staff and volunteers not liable for any injury or other liability incurred while participating in this walk. I further understand that I am solely responsible for my own health and safety and that it is my responsibility to dress appropriately and that my signature below certifies that I am fit and healthy enough to participate in this activity. I give my permission for the organizers of this event to use my image as a participant in this event in photographs, video, or other recordings. If I choose to register or otherwise involve a minor under my care in this walk the same lack of liability extends to the minor participant.

Signature _____ Date _____