

Chicago Walkers Club – Long Distance Group



NAME _____ AGE: _____
ADDRESS _____ Date of Birth _____
CITY _____ STATE _____ ZIP _____ SEX M ___ F ___
TELEPHONE _____ CWC Member Yes No

WAIVER: In consideration of being allowed to participate in any or all of the walking events listed below, I hereby, for myself, my heirs, executors, administrators and assigns waive and release any and all rights and claims for damages I may hereafter have against the Chicago Walkers Club, its members and officers, event organizers, sponsors, officials and their representatives for any injuries I may suffer by reason of my participation in such event or events. I further certify that I am mentally and physically fit to participate in any and all of these events.

SIGNATURE _____ DATE _____
(If under 18 yrs. of age, signature of parent is required)

1/1/08	Holiday City Walk	8/3/08	Historic Riverside
2/3/08	Morraine Hills	9/7/08	Upper Fox River Trail
3/2/08	Fox River Trail	9/21/08	Lake Geneva
4/6/08	Great Western Trail	10/25/08	Morton Arboretum
5/4/08	Highland Park	11/2/08	Starved Rock
6/1/08	Hyde Park	12/7/08	Kline Creek Farm
7/13/08	Waterfall Glen		



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