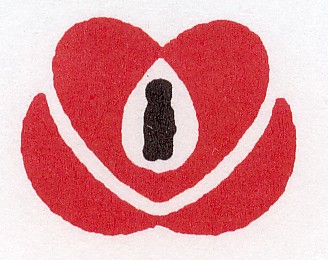
**REGISTRATION FORM**



**12th ANNUAL DR. JAMES R. CLARK MEMORIAL SICKLE CELL WALK**

**St. Luke’s Episcopal Church**

**William F. O’Neal Gymnasium**

**1300 Pine Street**

**Columbia, SC 29204**

**SATURDAY, SEPTEMBER 9, 2017**

The undersigned Participant makes this application to participate in the James R. Clark Memorial Sickle Cell Foundation Walk with the expressed understanding that the James R. Clark Memorial Sickle Cell Foundation is not responsible for any sickness or injury that the Participant may receive while in attendance or participating in this event. The James R. Clark Memorial Sickle Cell Foundation reserves the right to reject any and all applicants. Applicant agrees to hold the James R. Clark Memorial Sickle Cell Foundation, its employees and sponsors harmless against all damages due to sickness or injury occurring while in attendance at this event. The Participant affirms that he/she is physically able to participate in the event and that he/she does not suffer from any condition which would make such participation dangerous to the participant or to others. **Signatures are required for participation in the Walk and indicate agreement with all terms of the above waiver.**

* **This form can be used for individual or multiple registrations.**
* **This form can be photocopied.**
* **Please make checks payable to the James R. Clark Memorial Sickle Cell Foundation and designate money for the Scholarship Fund**
* **REGISTRATIONS MUST BE RECEIVED BY FRIDAY, AUGUST 11, 2017 TO GUARANTEE PREFERRED T-SHIRT SIZE.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_ T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_ T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_ T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_ T-Shirt Size: S\_\_M\_\_L\_\_XL\_\_XXL\_\_3X\_\_4X\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**T-SHIRT TOTALS THIS PAGE:**  S\_\_\_\_\_\_M\_\_\_\_\_\_L\_\_\_\_\_\_XL\_\_\_\_\_\_\_XXL\_\_\_\_\_\_3X\_\_\_\_\_4X\_\_\_\_\_