7th Annual STEPS FOR STUDENTS

VOLUNTEER INFORMATION AND RELEASE FORM

Fax 713.659.7640 P.O. Box 4817 Houston, TX 77210-4817

Thank you for joining the Steps for Students volunteer team. It takes many hands working together before and throughout the race to ensure success. Please complete the information below and fax or mail the sheet to the Development Department of the Archdiocese of Galveston-Houston. A member of the volunteer committee will contact you to coordinate your placement.

Name: _____
First MI Last

Permanent Address:_____
City State Zip

Phone: (Home)_____(Cell)_____e-mail: _____

Group Name (if any):_____School/Parish:_____ D.O.B: _____

T-shirt size: (please circle one) Sm Med LG XL XXL

EMERGENCY CONTACT INFORMATION

Name:_____ Relationship: _____

Phone (Home):_____ (Cell)_____
** Must be signed by a parent if volunteer is under 18 years of age.

Any health concerns _____

In consideration of acceptance of these duties, I hereby waive and release any and all claims against the Archdiocese of Galveston-Houston, ***Catholic Schools***, and any and all other sponsors and officials of the 2012 *Steps for Student 5k Run/Walk or 1k Fun Run/Walk* for any injury or illness which may directly or indirectly result from my participation in the event. I state that I am in proper condition to participate in the event.

Further, I hereby grant full permission to any and all of the foregoing to use my photograph or any other record of this event for any legitimate purpose.

If volunteer is under 18 years of age, parent or guardian must sign waiver and it applies to entrant and parent or guardian. The race director reserves the right to refuse any entry.

Print Name: _____Signature: _____

Date: _____

Legal Guardian Signature _____