



Friends of the Poor® Walk/Run

S. of North Shore & River Bank

City Park Reunion Shelter & Festival Grounds

Freedom Avenue @ Aroner Boulevard, New Orleans LA 70124

Sat. 9/28/19 Register 8:15 am - Start 9:15 am

The Society of St. Vincent de Paul is a (501)(c)(3) non-profit organization.

All donations are non-taxable to the full extent of the law.

Walker/Runner/Volunteer Registration Form

Designated Conference/Council as Beneficiary:			
Full Name:			
Address	City:	State: LA	Zip:
Phone:	Age:	Male / Female	
Email:			
T-Shirt: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> 2X <input type="checkbox"/> 3XL			
BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ & FULLY UNDERSTAND THE WAIVER & RELEASE OF LIABILITY.			
Signature of Participant or Guardian's (under 18 y/o):			
Emergency Contact Name:		Phone #	
Please mail completed form to: FOP® Walk/Run; 3004 41st Street; Metairie LA 70001 OR			
Register Online at: www.fopwalk.org >Louisiana >New Orleans City Park Festival Grounds & Reunion Shelter			
Questions?:			
Conner 504.382.2721		conner@wicep.com	
Sandy 504.831.8809		normansand76@gmail.com	
ACCIDENT WAIVER & RELEASE OF LIABILITY			
I recognize & acknowledge that there are inherent risks in my presence & participation in the St. Vincent de Paul Friends of the Poor® Walk/Run on 9/28/2019. I acknowledge this <i>Accident Waiver & Release of Liability</i> form will be used by the event holders, sponsors & organizers, in which I may participate, & that it will govern my actions & responsibilities at said events. In consideration of my registration & participation in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors & assigns as follows:			
(A) Waive, Release & Discharge from any & all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter occur to me or my traveling to & from this event, the Society of St. Vincent de Paul, their directors, officers, employees, volunteers, representatives and agents, event holders, event sponsors, event directors & volunteers;			
(B) Indemnify & Hold Harmless the entities or persons mentioned in this paragraph from any & all liabilities or claims made by other individuals & entities as a result of any of my actions during this event.			
I am aware the Society of St. Vincent de Paul does not provide health & accident coverage for me & that it is my responsibility to pay any medical bills from injuries sustained while participating in the Friends of the Poor Walk/Run®.			
I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident &/or illness during this event.			
I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors organizations & assigns.			

SVdP Archdiocesan Council of New Orleans
P O. Box 792880, New Orleans LA 70179-2880
504 827 5842 svdponeworleans.org

Serving the poor, hungry and homeless in New Orleans since 1852.