Participant Registration

RELAY FOR LIFE — American Cancer Society

07028

PLEASE PRINT NEATLY IN BLACK INK USING UPPERCASE CHARACTERS.
PLEASE KEEP ALL WRITING INSIDE THE BOXES.

EVENT NAME: Arlington Relay for Life - 2011

EXAMPLE: ABC123

TEAM CAPTAIN'S NAME: JEPH ABARA

* = REQUIRED INFORMATION

CHECK IF TEAM CAPTAIN: ☐

TEAM NAME: 1-2-3-SMILE!

OFFICE USE ONLY $,.00

PLEASE SELECT YOUR T-SHIRT SIZE:
YOUTH SIZES: YS ☐ YM ☐ YL ☐
ADULT SIZES: S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL ☐

TITLE (MR, MRS, MS, DR)

*FIRST NAME

MI

* LAST NAME

SUFFIX (SR, JR, III)

PROFESSIONAL DEGREE (MD, PHD)

GENDER M ☐ F ☐

* HOME ADDRESS

HOME ADDRESS LINE 2

*CITY

* STATE

*ZIP

HOME PHONE W/AREA CODE

EMAIL ADDRESS

JOHNDOE@EXAMPLE.COM

THIS IS MY EMAIL AT: HOME ☐ WORK ☐

BIRTH DATE M M D D Y Y Y Y

RACE OR ETHNICITY (PLEASE SELECT ONLY ONE BOX.) TO ENSURE THAT WE ARE DOING OUR VERY BEST TO ENGAGE ALL OF OUR CONSTITUENTS AND KEEP YOU BETTER INFORMED ABOUT SPECIFIC SOCIETY ACTIVITIES AND PROGRAMS THAT YOU MAY BE INTERESTED IN, WE ARE ASKING CONSTITUENTS TO SELF-IDENTIFY THEIR RACE OR ETHNICITY.

AFRICAN AMERICAN/ BLACK ☐ | AMERICAN INDIAN/ ALASKAN NATIVE ☐ | ASIAN ☐ | CAUCASIAN/ WHITE ☐ | HISPANIC/ LATINO ☐ | PACIFIC ISLANDER ☐ | OTHER ☐

MY REASON TO RELAY
PLEASE SELECT ALL THAT DESCRIBE YOUR EXPERIENCE WITH CANCER:

- CAREGIVER FOR SOMEONE WHO HAS/HAD CANCER ☐
- I HAVE/HAD CANCER ☐
- MY RELATIVE HAS/HAD CANCER ☐
- MY FRIEND HAS/HAD CANCER ☐

MY MOST RECENT DIAGNOSIS IS/WAS...
PLEASE INDICATE BELOW

- COLON/ RECTAL ☐
- BREAST ☐
- LUNG ☐
- PROSTATE ☐
- OTHER ☐ _____
- SKIN ☐

MY DATE OF DIAGNOSIS IS/WAS M M D D Y Y Y Y

PLEASE SELECT ALL OF THE OPPORTUNITIES IN WHICH YOU ARE INTERESTED:

- BECOMING INVOLVED IN OTHER ACS VOLUNTEER OPPORTUNITIES ☐
- INCLUDING ACS IN MY WILL, TRUST OR ESTATE PLAN ☐
- ADVOCATING FOR LEGISLATION TO MAKE CANCER A TOP NATIONAL PRIORITY THROUGH YOUR PARTNER ORGANIZATION, ACS CAN ☐
- BECOMING MORE INVOLVED IN RELAY FOR LIFE NEXT YEAR ☐

PLEASE INCLUDE YOUR EMAIL ABOVE TO ENSURE A QUICK FOLLOW-UP TO YOUR STATED INTEREST

- AS A PARTICIPANT IN RELAY FOR LIFE, FOR MYSELF, MY EXECUTOR, ADMINISTRATORS, AND ASSIGNS, I DO HEREBY RELEASE AND DISCHARGE THE AMERICAN CANCER SOCIETY, THE EVENT SITE, THEIR MANAGEMENT, THEIR OFFICERS, MEMBERS, SPONSORS, ORGANIZERS, OR THEIR REPRESENTATIVES, OR THEIR SUCCESSORS, AND ALL COOPERATING BUSINESSES AND ORGANIZATIONS FROM ALL CLAIMS OF DAMAGES, DEMANDS, ACTIONS, AND CAUSES WHATSOEVER, IN ANY MANNER ARISING OR GROWING OUT OF MY PARTICIPATION OR THAT OF MY CHILD IN THIS EVENT.
- I GIVE MY FULL PERMISSION FOR THE USE OF MY NAME AND PHOTOGRAPH IN THIS EVENT.
- I ALSO GIVE MY FULL PERMISSION FOR SUCH FIRST AID AS IS DEEMED NECESSARY TO BE PROVIDED TO ME OR MY CHILD ON THE PREMISES OR PRIOR TO TRANSPORT TO A HOSPITAL FOR FURTHER TREATMENT.

PARTICIPANT/GUARDIAN SIGNATURE _____ DATE _____

DC-07028G REV.-7/08

Enclose a check for **$10 or more** payable to **American Cancer Society.** (***T-shirt only for $100 or more.***)

Mail to:
Jeph Abara
PO Box 3635
Arlington, TX 76007

Phone: 817-265-4578

Relay info:
4/29/11 – 4/30/11 (Fri-Sat) 7 PM – 7 AM
Coca-Cola Pavilion, near Ballpark in Arlington (Rangers Ballpark), Arlington, TX 76011