AAUW NYS 2011 Convention Twelfth Annual EOF Fun Walk

Please mail by March 30.

Mail to:

Dr. Lisa D. Clark, NYS EOFVP, 9 Eastmount Drive #199, Slingerlands, NY 12159 RE: WALK

Home Phone E-mail Branch Please check one: Participating in O Walk O Raffle for Beauty/Salon Services **Please read carefully and sign:** I assume all risks associated with participating in this event, including, but not limited to fal contact with other participants, the effects of weather, traffic, and road conditions, all such a being known and accepted by me. Having read this waiver and knowing these facts and in consideration of your acceptance of my entry, I, for myself and anyone entitled to act on my waive and release all sponsors, event officials, and their representatives and succors from a or liabilities of any kind arising from my participation in this event. **Signature: Date: **AAUW NY State Convention 2011 EOF Fundraiser** Branch **Sponsor Name** **Sponsor Name** **Sponsor Address** **Amount Donated** **Amo	ıme		
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