

## **BUDDY WALK**® Registration Form

SUNDAY May 5th, 2024

12:00 p.m. - 3:00 p.m.

Core Creek Park Langhorne, PA

## **REGISTRATION IS REQUIRED BY APRIL 28th**

\*(Due to new Core Creek Park Regulations)

## PLEASE REGISTER BY MARCH 15th TO ENSURE A T-SHIRT

PHOTOCOPY THIS FORM AS NEEDED - PLEASE PRINT

Last Name:	First Name:	<del></del>	
Street Address:			
City:	State:	Zip:	
Phone:	Email:		
Team Name (if any):			
Teams consist of 10+ registered walkers	T-SHIRT SIZE	(s) - Please Write Quantity	
Register Walkers	Adult Sm:	Child XS:	
# of Adults:x \$20 ea. = \$	Adult Med:	Child Sm:	
# Children:x \$10 ea. = \$	Adult Lg;	Child Med:	
(ages 6-12) [Children under 6 walk for		_	
Please provide ages of children under 6:	Adult 2XL (+\$3):	<del></del>	
Additional Donation Amount: \$	V 4' It 3 XI (±¢3).		
 Total: \$	Adult 4XL (+\$3):		
BUDDY WALK ® DONATI I cannot attend but would like to a donation in the amount of \$100 \$50 \$25 Other	Check Hopes and D Please complete a Hopes & Di 517	Checks are Payable to: Hopes and Dreams Foundation, Inc Please complete and mail with your payment to: Hopes & Dreams Foundation. Inc. 517 Cedarbrook Rd Southampton, PA 18966	
Waiver: In consideration of me and/or my minor che representatives—assume any and all risks which might Dreams Foundation, Inc., its officers, employees, sponsinjuries or damages of any kind whatsoever suffered by authorize the use by the Hopes and Dreams Foundation	sors, organizers, volunteers or other representatives y myself and/or my minor child as a result of taking pa	e, discharge and covenant not to sue Hopes and or their successors and assigns, for any and all art in the events and any related activities. I also	
Signature:		Date:	
	on is not valid without sig		