LPS/FOOD BAND RELEASE AND INDEMINFICATION

The BackPack Extra Mile walk involves walking – an activity which may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic and conditions of the road. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including personal injury and death, arising in any way out of my participation in the BackPack Extra Mile Walk and related activities. It is my responsibility to dress appropriately. I am solely responsible for my own health and safety. I agree to release, indemnify, and hold harmless the Lincoln Public Schools and the Food Bank, its affiliates, offices, directors, volunteers, and employees, and all sponsoring businesses and organizations and their agents and employees, from any and all liability, claims, demands, and causes of action whatsoever, arising out of my participation in this event and related activities – whether it results from the negligence of any of the above or from any other cause. I have read, understand and agree to the terms of this agreement.

Participant/Family
Signature_____

Printed Name_____

Date_____

If the participant is a minor, parent or guardian must sign below:

I am the legal guardian of participant, and I hereby consent to his/her participation. I have read the foregoing release and indemnification agreement, and I hereby agree on behalf of myself and participant to its terms.

Parent/Guardian
Signature_____

Printed Name _____

Date_____

BackPack Extra Mile Walk organized by Lincoln Public Schools employees.

BackPack Extra Mile

Donation Record

Participant/Family _____ Number of Participants_____

Sponsoring School/Building/Department_____

☐ **Adult $5.00 Registration Fee** ☐ **T Shirt Needed** ☐ **No T Shirt**

☐ **Student (No Registration Fee Required)**

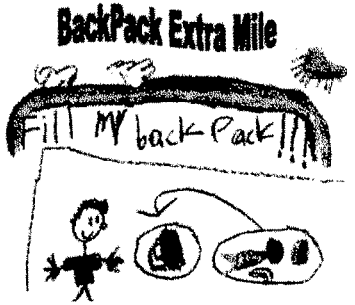
☐ **I am not able to participate in the walk but would like to make an individual donation**

Team Captain Name_____ Return envelope no later than_____

Donor	Donation	Corporate Matching Gift?	
Joe Smith	$50	YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
		YES	NO
Grand Total $			

Make checks payable to the **Food Bank**. Please collect all contributions in advance and submit to your Team Captain. **All contributions are tax deductible.**

Thank You!



FOOD BANK OF LINCOLN