

American Academy of Allergy, Asthma & Immunology Foundation, Inc. (AAAAI Foundation)

5K Run/Walk Registration Form

Sunday, March 4, 2018 • Orlando, Florida • Proudly sponsored by 



Donor Information (please print or type)

First Name: _____ Last Name: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone 1: _____ Phone 2: _____

E-mail: _____

Participant Waiver, Must Complete Entire Section

I assume full and complete responsibility for any injury or accident which may occur during my participation in this race/walk or while on the premises of this event; and I hereby release and hold harmless the sponsors, promoters, and all other persons and entities associated with this event or their agents of employees or otherwise. I grant full permission to any and all of the foregoing to use my (and my child's) name, photographs, videos, and other recordings of participation in this event, without obligation or liability to me (and my child). I have read this agreement carefully, and understand it, and certify my agreement by signing below.

Signature (Parent's Signature if under 18): _____ Date: _____

Birthdate: ____/____/____ Gender: ☐ Male ☐ Female

5K Run/Walk Registration and Payment

- ☐ \$45 Pre-Registration (Includes t-shirt and glow swag) - **Closes February 20, 2018**
- ☐ \$50 Onsite Registration (Includes t-shirt and glow swag) - **Opens March 1, 2018 in Orlando**
- ☐ \$10 Child 12 and under Registration (Includes t-shirt and glow swag)
- ☐ \$0 Child 12 and under Registration (no t-shirt or swag included)

T-Shirt size: ☐ SM ☐ MED ☐ LG ☐ XL ☐ 2XL ☐ 3XL

Total: _____

Full payment of total registration fees must accompany this form. Make checks payable to the AAAAI Foundation.

☐ Cash ☐ Check (Check # _____) ☐ AMEX ☐ MC ☐ Visa ☐ DISC

Credit card number _____ Exp. date _____

Cardholder's First Name _____ Last Name _____

Authorized signature _____

The American Academy of Allergy, Asthma & Immunology Foundation Inc. (AAAAI Foundation) Formerly the ARTrust™ is a 501 (c) (3) tax-exempt organization, the tax ID number is 45-1495723. T: (414) 272-6071 • F: (414) 272-6070 • foundation@aaaai.org

PLEASE SEND YOUR COMPLETED FORM TO FOUNDATION@AAAAI.ORG