

# San Diego Race for Autism 2019

5K Run/Walk and 1-Mile Family Walk

April 6 - Balboa Park

## Registration Form (All registrants must complete)

**Please use ONE form per person**

<b>First Name</b>	<b>Last Name</b>
<b>Address (Street) /Apt. #</b>	
<b>City</b>	<b>State</b>
	<b>Zip Code</b>
- -	<b>M</b> <b>F</b>
<b>(Area Code) Phone Number - Daytime</b>	<b>Age</b>
	<small>(on March 25, 2017)</small>
	<b>Date of Birth (MM-DD-YYYY)</b>

**Email Address (Please make sure it is readable and correct – it will be used to send you race details/instructions)**

Shirt Size	I am an/a:	Registration (See Table Below)	-
<input type="checkbox"/> Youth Cape	<input type="checkbox"/> Individual with Autism/ASD	1) <b>Adult/1-M or 5K</b>	\$
<input type="checkbox"/> Small/Adult Unisex	<input type="checkbox"/> Parent of individual with Autism/ASD	2) <b>Youth/1-M or 5K</b>	\$
<input type="checkbox"/> Medium/Adult Unisex	<input type="checkbox"/> Relative of individual with Autism/ASD	3) <b>Child/1-M or 5K</b>	\$
<input type="checkbox"/> Large/Adult Unisex	<input type="checkbox"/> Friend of individual with Autism/ASD	4) <b>5K Chip Timed Fee (\$ 3.00)</b>	\$
<input type="checkbox"/> X-Large/Adult Unisex	<input type="checkbox"/> Professional in the field of Autism	5) <b>XX-Large T-Shirt Fee (\$3.00)</b>	\$
<input type="checkbox"/> XX-Large/Adult Unisex (\$3 Fee)	<input type="checkbox"/> Other :	Additional Donation	\$
<input type="checkbox"/>	<input type="checkbox"/> 1-Mile Fun Walk		
<input type="checkbox"/>	<input type="checkbox"/> 5K Run/Walk	<b>Must be postmarked by March 31, 2019</b>	

**Make Checks payable to :**  
**National Foundation for Autism Research**

<b>Total</b>	<b>\$</b>
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**RACE RELEASE (MUST BE SIGNED BY PARTICIPANT OR APPLICATION WILL BE REJECTED):** I understand that my consent to these provisions is given in consideration of the acceptance of this registration and for being permitted to participate in this event. I am a voluntary participant in this event, and in good physical condition. I hereby assume full and complete responsibility for any injury or accident which may occur during my participation in this event and I hereby release and hold harmless and covenant not to file suit against the National Foundation for Autism Research and any affiliated individuals, the San Diego Race for Autism and any affiliated individuals, the City of San Diego and all governmental agencies whose property and/or personnel are used, and all other persons or entities associated with this event (the "Releasess") from any loss, liability, damage, or claims I may have arising out of my participation in this event, including personal injury or damage suffered by me or others. I give my full permission to the National Foundation for Autism Research to use any photographs, videotapes, or other recordings of me that are made during the course of this event. I also give my full permission for such first aid as deemed necessary to be provided to me or my child on the premises or prior to transport to a hospital for further treatment.

_____ <b>Signature of Participant or Guardian</b>	_____ <b>Today's Date</b>
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**For Team Participation (if applicable)**  
 Team Name \_\_\_\_\_

**I want to learn more about. ...**  
 **Becoming a Corporate Sponsor**

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**Please use ONE form per person**

Team Captain \_\_\_\_\_

### Instructions

Each individual needs to fill out and sign a registration form.

Families – Please fill out a form for each person participating in the San Diego Race for Autism event. You can send in one check for the whole family.

If you want to pay by credit card, please use our on-line registration at **www.RaceforAutism.org**.

It is easy and secure and allows you to have your own fundraising webpage.

### FEES Registration includes a bib, t-shirt or cape, and commemorative finisher medal.

	<b>Before Dec 31</b>	<b>Jan 1 - 31</b>	<b>Feb 1- 28</b>	<b>Mar 1 - 31</b>
<b>ADULTS</b> ( 18+ yrs old)	\$29.00	\$32.00	\$35.00	\$40.00
<b>YOUTH</b> (13-17 yrs old)	\$25.00	\$28.00	\$30.00	\$35.00
<b>CHILDREN</b> (under 12 yrs old)	\$18.00	\$20.00	\$25.00	\$30.00
<b>Race from Home **</b> (includes Mailing of Bib and T-shirt)	\$30.00	\$30.00	\$35.00	\$35.00
<b>Chip Timing Add-on</b>	\$3.00	\$3.00	\$3.00	\$3.00

\* Infants ages 3 years & under are not required to register and pay race fees. However, they will NOT receive a bib, kid's race medal or t-shirt.

\*\* Race from Home is for those that cannot attend on Race Day and still want to support the cause. Mailings occur shortly AFTER the race.

**Race Disclaimer: The race can be altered, postponed or cancelled with no refunds due to weather, natural disturbances, police activity, acts or threats of terrorism. Also the event is a fundraising event with no refunds. Transfers of entry to another individual is allowed March 17, 2019.**

Participants will receive an official event T-shirt and a commemorative medal. T-Shirt size or availability may be limited for LATE/Race Day registrations.

### **Mail completed registration forms and payment to:**

**National Foundation for Autism Research  
Attn: Race for Autism  
PO BOX 502177  
San Diego, CA 92150-2177**