MAIL-IN REGISTRATION FORM

Register online www.buddyfestnw.org (preferred) by Sept. 20, 2018 or mail this form to NWDSA • 11611 NE Ainsworth Cir, Ste 321 • Portland OR 97220

First & Last N	ame									
Address										
Phone	hone Email									
If on a team, li	ist team	name and captain								
Team name Team capt						ptain	ain			
T-chirt cizos (l	Dlaasa i	ndicate quantity)								
Adult Sizes	riedse i	nuicate quantity)								
S	Μ	L	XL		2XL		3XL		4XL	
Youth Sizes										
Baby Onesie		XS (2/4)	S (6/8	3)		M (10/12)		L (14/1	6)	
									• • • • •	
\$ Registration fees enclosed						Re	Registration Fees			
A						3	3 & under: FREE			
+ \$		_ Additional donation Amount (Tax deductible)) Ag	Age 4 thru 18: \$10			
= \$		Total Enclosed				A	Age 18 & up: \$15			
τ						• • • •			•	
Donation in	∃ My na	me or 🛛 Team n	ame:							

Make checks payable to: NWDSA • 11611 NE Ainsworth Circle, Suite 321 • Portland, OR 97220

Waiver: In consideration of me and/or my minor child being permitted to participate in the Buddy Fest NW, I hereby for heirs, my personal representatives and myself assume any and all risks that might be associated with the event. I further waive, release discharge and covenant not to sue the Northwest Down Syndrome Association, their officers, employees, sponsors, organizers, volunteers, or other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered by myself and/or my minor child as a result of taking part in the event and any related activities. I also authorize the use by NWDSA of any photo, film or videotape taken of me or my minor child at the event for any purpose.

Signature: _____

Date: _____

For more information or to contribute online visit www.buddyfestnw.org or call (503) 238-0522

Photocopy this form as needed or download a printable copy at www.buddyfestnw.org