

**FIRST
FROST
WALK**



19th Annual First Frost Walk
Thompson Park and Zoo, Watertown NY
October 14, 2018 – 1:00PM



Registration Form

First Name: _____ Last Name: _____

Age on day of the event: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

I am participating as an:

Individual Team Member (Minimum of \$25 per person to participate)

Team Name: _____

Team Captain: _____

Please read and sign... I understand that by signing this document that I agree to hold harmless AIDS Community Resources including dba ACR Health its employees, volunteers, and agents; all sponsoring organizations; and any other parties connected to this event in any way, singly or collectively, from and against any blame or liability for any injury, misadventure, harm, loss, inconvenience, or damage hereby suffered or sustained as a result of participation in this event or any activities associated herewith, whether or not caused by the fault or negligence of any of them. I hereby give my permission to AIDS Community Resources, its successors or assigns, to use my photograph whether still, motion, or television in any legal manner whatsoever. I understand that I may be contacted through print or digital means.

Signature _____ Signature of Parent/Guardian if Under 18 _____

EVENT SCHEDULE

- **11:30 am** Registration Opens -- Day-of registration; pick up your Walk Packet (along with earned incentives), and turn in any additional donations
- **11:45 am** Complimentary snacks and beverages available in the Hospitality area
- **12:45 pm** Opening Ceremony & Warm-up
- **1:00 pm** First Frost Begins
- Closing Ceremony and Festivities begin once the Walk has concluded

