



In Aid of the Children of Venezuela

2017 ROYAL PARKS HALF MARATHON CHARITY PARTNER COMMITMENT FORM

Please complete the following information and email to info@chamos.org.uk

Last Name: _____

Name: _____

Address: _____

City: _____

Postcode: _____

Telephone: _____

Email: _____

Age: _____ Gender: _____

Is this your first time running a half marathon? Yes _____ No _____

PLEASE NOTE: By registering for the Royal Parks Half Marathon, you are pledging to raise a minimum of £350 for CHAMOS – In Aid of the Children of Venezuela. If you are unable to raise this minimum amount, you are liable to cover the remaining sponsorship amount yourself. The payment schedule is as follows:

- 1) £ 135.00 for your Royal Parks Half Marathon registration on or before **September 25th, 2017**.
- 2) Payment of the minimum amount pledged within 30 days following **October 8th, 2017**.

Form of payment: by bank transfer/direct debit to:

Bank: HSBC

Account: CHAMOS

Account No.: 11891677

Sort code: 40-07-30

I agree to the above terms and will raise a minimum of _____ for CHAMOS – In Aid of the Children of Venezuela.

Print Name: _____

Date: _____

Signature:

If you have a personal connection to the Children of Venezuela, please feel free to provide your story on an additional page.

Thank you for your support!

**CHAMOS – In Aid of the Children of Venezuela
PARTICIPANT WAIVER AND RELEASE**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN THIS EVENT. I certify that I am physically fit, sufficiently prepared for participation in the event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this event.

In consideration of permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

1. I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of CHAMOS, a non-profit charity, and its officers, directors, board members, for my personal injury, death or disability, property damage, property theft, or actions of any kind which may hereafter occur to me while participating in this Event.
2. I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE CHAMOS from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of CHAMOS, or one of its sponsor partners or otherwise. I acknowledge that CHAMOS is not responsible for the errors, omissions, acts, or failures to act of any party or entity conducting the Event on behalf of CHAMOS.
3. I hereby understand that, except as otherwise agreed to by CHAMOS, in writing, CHAMOS does not carry or maintain health, medical, or disability insurance for any Volunteer.
4. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this Event.
5. I understand that I may be photographed during this Event and its related activities, and I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by CHAMOS, sponsors, organizers, and assigns.

This waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT FREELY.

Name (in Print)

Age

Signature

Date