



REGISTRATION FORM

Thank you for taking part in our 4th annual McCeney March to honor the memory of Jim McCeney on **September 28, 2019!**

Pre-Event Registration Participation Fees: (check all that apply)

- Children under 18 Adults Family of 4 (any ages) Additional Donation
- \$10** **\$25** **\$60** \$ _____
- Acknowledgement in the LHS newsletter and online media
- \$25** *Name as it should appear* _____

Total Enclosed: \$ _____ Check Credit Card (online payment)

NOTE: Saturday Sept. 28 Onsite Registration Fees: \$10 Children under 18, \$30 Adults, \$65 Family of Four

Form must be submitted in addition to online payment.

Participant Info:

Name(s): _____

Address: _____

Phone: _____ Email: _____

Birthdate(s): _____

T-Shirt Size(s): *Please indicate Adult or Child sizes.* _____

*****Registrations must be received by September 6, 2019, to guarantee a T-shirt.*****

In consideration of my entry, I intend to be legally bound for myself, my heirs, my executors, and administrators, do hereby release and discharge Laurel Historical Society, and all other contributors from any and all liability arising from illness, injury, and damages that I may suffer as a result of my participating in this event. I also understand that the LHS and any event sponsors may use for publicity of the McCeney March, my name and/or picture without any obligation or liability to me. I am expected to obey all traffic and pedestrian laws.

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

If registering more than 1 person using this form, please have each participant (or their guardian) sign

Return all forms to:

PO Box 774, Laurel, MD 20725 OR info@laurelhistoricalsociety.org