



March 5, 2018

Dear Riley Center Parents and Staff,

Once again the time has arrived for The Riley Center to form a team for the annual Walk for Autism. Each year we join thousands to raise money and autism awareness in hopes of providing a better future for children and their families whose daily lives are impacted by autism. We would like to invite you to show support for our families and work we do at The Riley Center by walking with us as Team Riley Center (TRC). This is a fun and supportive family-focused event which brings together people from all across the community who wish to show acceptance for all affected by autism. There will be a 2 mile walk, food, games, and activities for the children.

The Funky Fun Walk for Autism for Huntsville/Madison County will be held on April 14 at the **Jaycees Community Building** (2200 Jaycee Way SW). If you are interested in joining the Team Riley Center (TRC), please complete the attached registration form and return it to The Riley Center or you may register on-line at FunkyFunRun.com. If you register online, please be sure to join under Team Riley Center (TRC). Checks should be made out to the Autism Society of Alabama or you may pay by credit card. We will not be accepting cash for the registration this year. Please register by April 3 to be part of Team Riley Center (TRC).

For you runners out there, you may want to participate in the 5K Run on Sunday, March 25, held at Hampton Cove Middle School. Registration for this event can be found on the attached flyer or at FunkyFunRun.com. Again, you can join Team Riley Center (TRC) either by registering on the attached flyer or at the Funky Fun Run website.

The Riley Center has participated in this walk for over a decade, earning Team Spirit recognition most years. Let's continue this long tradition of Team Spirit by having most of our families participating if possible. To encourage our team spirit, we will be ordering team shirts for this year's walk, flyers are attached. If you can't participate in the walk, you can still purchase a t-shirt to support our team.

Please join Team Riley Center (TRC) at the walk and show your support for all affected by autism. If you have questions you may call 256-882-2457.

Thank you and we'll see you at the walk,

A handwritten signature in blue ink that reads "Heather Nickell".

A handwritten signature in blue ink that reads "Mary Katherine Holloway".

Mary Katherine Holloway & Heather Nickell
Co-Team Captains for Team Riley Center (TRC)

Registration Form

Or register online at www.FunkyFunRun.com

Mail/Deliver to:
Autism Society of Alabama,
4260 Cahaba Heights Court, Suite 188
Birmingham, AL 35243

Walk/Race Information

205-951-1364

PLEASE READ & SIGN BELOW
ONLY SIGNED ENTRY FORMS WILL BE ACCEPTED

Name: _____
Address: _____
City: _____ ST: _____ Zip: _____
Phone: _____ Email: _____

WALK 4 AUTISM

(April 14th, Jaycees Community Building)

PARTICIPATION TYPE
(Includes T-shirt*)

*TRC Team Participating

- Adult - \$30** **Youth - \$20** (10 & under)
- Small Small
 Medium Medium
 Large Large
 XLarge XLarge
 2XL 2XL
 3XL (+\$5) 3XL (+\$5)

I would like to make a tax deductible donation in addition to my entry fee \$ _____

*Youth may walk free with paying adult, but will not receive a t-shirt.

5K RUN 4 AUTISM

(March 25th, Hampton Cove MS)

PARTICIPATION TYPE
(Includes T-shirt)

- Adult - \$35** **Youth - \$25** (10 & under)
- Small Small
 Medium Medium
 Large Large
 XLarge XLarge
 2XL 2XL
 3XL (+\$5) 3XL (+\$5)

Total Amount of Registrations & Additional Services \$ _____

TEAM INFORMATION (circle one):

Not on a Team Joining a Team Registering a New Team

Team Name: Team Riley Center Team Captain: Mary Katherine Holloway + Heather Nickell

PAYMENT TYPE (please check one):

CASH CHECK (Make checks payable to: Autism Society of AL)

CREDIT CARD #: _____ EXP DATE: _____

ADDITIONAL REGISTRANTS

NAME	SHIRT SIZE	AMOUNT

I do hereby RELEASE AND FOREVER DISCHARGE, to the fullest extent permitted by law, the Autism Society of Alabama, Inc. and their directors, trustees, officers, partners, agents, servants, employees, successors, assigns, licensees, sponsors, donors, volunteers, representatives, guests and affiliates (the "RELEASED PARTIES" from any and all claims, demands, actions, causes of action, judgments, and/or expenses (including without limitation reasonable attorneys' fees), which I, my heirs, representatives, or assigns may presently, or at any time in the future, possess against the RELEASED PARTIES, arising out of or related to any loss, damage or injuries to person(s) or property sustained or incurred in connection with, or as a result of, my participation or the participation of others, either directly or indirectly, in the aforementioned event or any other activities or programs sponsored by the Autism Society of Alabama, Inc., either on or off campus, or arising out of any travel thereto (the "ACTIVITIES").

I hereby personally ASSUME ALL RISK for any injury or other damages to myself, my property or the property of others which may in any way, whether foreseeable or not, arise out of my participation or the participation of others in the ACTIVITIES. I AGREE TO INDEMNIFY AND HOLD WHOLLY HARMLESS the RELEASED PARTIES for any and all liability, loss, expense, or damage they may incur at any time by virtue of allowing me to participate in the ACTIVITIES.

In the event of a breach of this Waiver and Release of Liability by me or anyone acting on my behalf, I AGREE AND WARRANT that I will be liable to pay, and will pay, each of the RELEASED PARTIES their actual attorneys' fees, court costs, and other expenses caused by such breach and will make them whole for any and all sums of money they expend because of such breach, and that I will otherwise be liable as provided by law. I acknowledge that this is a LEGALLY BINDING CONTRACT. In the event that any provision of this contract is held or adjudicated to be illegal or otherwise unenforceable, I AGREE that such a determination shall, in no way, affect the validity and enforceability of the remaining provisions of this contract, all of which shall remain enforceable to the fullest extent permitted by law.

I HAVE CAREFULLY READ THIS ENTIRE AGREEMENT, WITHOUT ANY TIME CONSTRAINTS BEING PLACED ON ME, AND FULLY UNDERSTAND AND AGREE TO BE BOUND BY ITS CONTENTS. I ACKNOWLEDGE THAT I AM VOLUNTARILY SIGNING THIS WAIVER AND RELEASE OF LIABILITY AND AM AWARE THAT, BY SIGNING THIS CONTRACT, I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS, AND IT IS MY INTENTION TO DO SO FREELY AND WITHOUT COERCION OR DURESS OF ANY TYPE.

Name (please print)

Signature (or Parent/Guardian, if under 18)

Date

TRC Funky Fun Walk for Autism Team Shirt Order Form

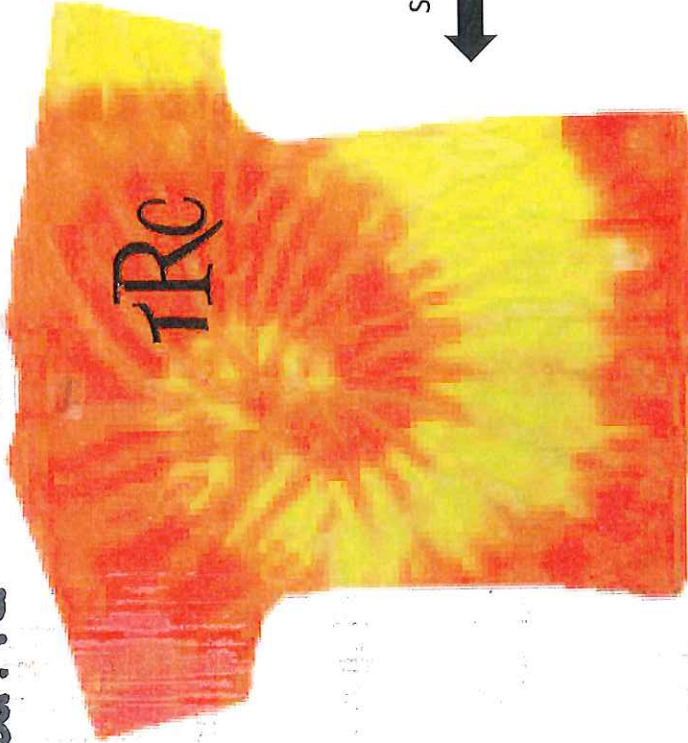
Price: \$15

Due: Mar. 16th

Back



Front



Shirts will be
this color



Name: _____

Amount Included: _____

Cash Check

Indicate Number of Each Size Wanted:

___ YXS ___ YS ___ YM ___ YL

___ AS ___ AM ___ AL ___ AXL ___ AXXL ___ AXXXL

you can still order a shirt even if you are not participating in the walk!