

MAIL-IN REGISTRATION FORM

Register online www.buddyfestnw.org (preferred) by Sept. 19, 2017
or mail this form to NWDSA • 11611 NE Ainsworth Cir, Ste 321 • Portland OR 97220

First & Last Name	
Address	
Phone	Email

If on a team, list team name and captain

Team name	Team captain
-----------	--------------

T-shirt sizes (Please indicate quantity)

Adult Sizes

S		M		L		XL		2XL		3XL		4XL	
---	--	---	--	---	--	----	--	-----	--	-----	--	-----	--

Youth Sizes

Baby Onesie		XS (2/4)		S (6/8)		M (10/12)		L (14/16)	
-------------	--	----------	--	---------	--	-----------	--	-----------	--

\$_____ Registration fees enclosed (\$14 per Adult, \$7 per Child)
+ \$_____ Additional donation Amount (Tax deductible)
= \$_____ Total Enclosed

Donation in My name or Team name: _____

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