



Participant Information (for additional registrations, please use next page)

First Name* _____ Last Name* _____

5K Fundraising Run Registration One Mile Fundraising Walk Registration

Are you a dialysis, transplant, CKD, or PKD patient? Yes No Prefer not to answer

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____ Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Team (Optional)

Circle your choice: Create Team Join Team Walk as individual

Team Name _____

Event

Number of \$10.00 1 Mile Walk Registrations: _____

Number of \$25.00 5K Registrations: _____

Payment Information

Total Enclosed: \$ _____

Cash enclosed Check enclosed payable to Tennessee Kidney Foundation

Credit Card VISA MASTERCARD AMERICAN EXPRESS

Name on card _____

Card # _____

Exp. Date and CVV code _____

Billing Address* _____

Zip Code* _____ City* _____ State* _____

Signature _____ Date _____

Please Submit This Form To:
Tennessee Kidney Foundation
Attn: Love Your Kidneys Walk
37 Peabody St, Suite 206
Nashville, TN 37210 **OR**
heather@tnkidney.org

Saturday, November 17, 2018
Registration: 6:30-7:30am Walk begins: 8:00am
Sharp Springs Park 311 Jefferson Pike, Smyrna, TN



Walker Information (complete one per person)

First Name* _____ Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____ Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Walker Information (complete one per person)

First Name* _____ Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____ Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Walker Information (complete one per person)

First Name* _____ Last Name* _____

Mailing Address* _____

Date of birth* ____/____/____ Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Saturday, November 3, 2018
Registration: 7:00-8:45am Walk begins: 9:00am
Centennial Park 2500 West End Avenue Nashville, TN 37203

LOVE
YOUR KIDNEYS
5K RUN AND 1 MILE WALK
RUTHERFORD COUNTY



TENNESSEE
KIDNEY
FOUNDATION

Email Address* _____
Walker Information (complete one per person)

First Name* _____

Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____

Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Saturday, November 3, 2018
Registration: 7:00-8:45am Walk begins: 9:00am
Centennial Park 2500 West End Avenue Nashville, TN 37203



Walker Information (complete one per person)

First Name* _____

Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____

Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Walker Information (complete one per person)

First Name* _____

Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____

Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

Walker Information (complete one per person)

First Name* _____

Last Name* _____

Mailing Address* _____

Date of birth* ____/____/____

Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

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Centennial Park 2500 West End Avenue Nashville, TN 37203

LOVE
YOUR KIDNEYS
5K RUN AND 1 MILE WALK
RUTHERFORD COUNTY



TENNESSEE
KIDNEY
FOUNDATION

Email Address* _____
Walker Information (complete one per person)

First Name* _____

Last Name* _____

Email Address* _____

Mailing Address* _____

Date of birth* ____/____/____

Gender* Male Female Prefer not to answer

Phone Number* _____ T-Shirt Size (Circle): S M L XL 2XL 3XL

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Registration: 7:00-8:45am Walk begins: 9:00am
Centennial Park 2500 West End Avenue Nashville, TN 37203



1 MILE WALK 



Waiver (one waiver must be signed by each walker)

By checking this box, I agree to the waiver and that I am 18 or older, or that I have the authority to register these participants and agree to the waiver for them, and agree to the [Privacy Policy](#).

I, the below signed, do hereby waive and release any and all right and claims for damages or injuries that I may have against Tennessee Kidney Foundation, and their agents, volunteers, and employees for any and all injuries to me or my personal property in relation to the November 3rd, 2018 Love Your Kidneys 1-Mile Walk ("The Walk"). This release includes all injuries and/or damages suffered by me during The Walk. I intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I assume all risks associated with running/walking in The Walk including, but not limited to: falls, contact with other participants, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks associated with The Walk. I acknowledge all such risks are known and understood by me. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization arising from injury during The Walk.

I grant Tennessee Kidney Foundation the right to take motion and still pictures of me and record my voice, statements, and to obtain other information about me, including but not limited to photographs and biographical information (collectively, "Footage and Materials"). The Footage and Materials shall also include any and all materials that I may create or otherwise provide to Tennessee Kidney Foundation at any time. I grant and assign to Tennessee Kidney Foundation all rights of any nature in and to all such Footage and Materials.

Tennessee Kidney Foundation shall have the right to use the Footage and Materials in any manner and in any media. The foregoing grant of rights includes, without limitation, Tennessee Kidney Foundation's right to use the Footage and Materials in advertisements, merchandising, publicity, and promotions, and for any entity that may sponsor, advertise in and/or exhibit in any manner the Footage and Materials.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver.

Participant Signature

Saturday, November 3, 2018
Registration: 7:00-8:45am Walk begins: 9:00am
Centennial Park 2500 West End Avenue Nashville, TN 37203