



MAIL-IN REGISTRATION FORM
 (Registration fees are non-refundable)
 Please print clearly. See pg. 2. for liability waiver.

October 5 - Missouri History Museum in Forest Park
The Sista Strut Rally is 8:00am-10:00am. The Sista Strut Walk starts at 10:00am.

Individual pre-registration is \$20. Team pre-registration is \$30 per person. All mail in registrations must be post-marked by September 12th. No cash or checks accepted. Credit cards and money orders only.

- Complete this registration form
- Insert money order made payable to: "Clear Channel Media & Entertainment c/o Sista Strut"
- Mail or drop-off with payment to: Clear Channel M+E, c/o Sista Strut, 1001 Highlands Plaza Drive West, #200, St. Louis, MO 63110

A portion of the proceeds benefit The Breakfast Club, Inc., an African American breast cancer support group, The Black Women Breast Cancer Survivors Project, a community-based project at UMSL and The Siteman Cancer Center.

INDIVIDUAL:

First: _____ M: _____

Last: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____

Cell Phone: () _____

Cancer Survivor? circle one (Yes / No) _____

T-Shirt Sizes (non-survivor):
 Enter total quantity for each size:

S M L XL 2X 3X

Cancer Survivor T-Shirt Sizes:
 Enter total quantity for each size:

S M L XL 2X 3X

Total Amount Due: \$20 per registration. \$20 for each additional shirt.

Total Enclosed: \$ _____

(PLEASE READ AND SIGN WAIVER & RELEASE)

TEAM: (*Complete individual team info next page.)

Team Name: **#TeamTrotters**

Team Captain's Name: **DeWarren Smith**

(Only Team Captains can pick up shirts)

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____

Cell Phone: () _____

of Cancer Survivors on your team? _____

Team registration: \$30 for each team member. Team limit 50 people.
 Team registration includes a 2013 Sista T-shirt, a Sista Strut Breast Cancer Awareness bag, and a team photo.

Total Enclosed: \$ _____

T-Shirt Size Totals (non-survivor):
 Enter total quantity for each size:

S M L XL 2X 3X

Cancer Survivor T-Shirt Size Totals:
 Enter total quantity for each size:

S M L XL 2X 3X

Clear Channel Media + Entertainment
 c/o Sista Strut
 1001 Highlands Plaza Drive West, #200
 St. Louis, MO 63110
 314-333-8000
 kmjm.com

sponsored by:



SistaStrut

Team Registration

(Complete info for each team member below)

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

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Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

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Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

(Complete info for each team member below)



First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

First: _____ M: _____ Last: _____

Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () Cell: () Your T-Shirt Size: Cancer Survivor? (Yes / No) circle one
S M L XL 2X 3X

WAIVER AND RELEASE AGREEMENT

I _____, will be participating in a charitable walk called the Sista Strut 2013 taking place on or about October 5, 2013 (herein defined as the "Activity") sponsored, promoted and/or conducted by radio stations Majic 100.3 (KMJM) and Hallelujah 1600 (KATZ) (herein defined as the ("Station")).

In consideration for allowing me to participate in the Activity, I understand and agree to the following:

For purposes of this Release Agreement, the "Released Parties" shall mean any person or entity associated in any way with the Activity, including but not limited to the Station, Siteman Cancer Center, Breakfast Club, Black Women's Breast Cancer Survivor's Project, Missouri History Museum, Forest Park, City of St. Louis, Clear Channel Broadcasting, Inc., any Activity Sponsor or Property Owners and each of the foregoing's respective parent, subsidiaries, affiliates, officers, directors, officials, talent, volunteers, employees and contractors. Furthermore, for purposes of this Release Agreement, the term "Loss" shall mean all damages, losses, costs, and injuries of every kind and character including, but not limited to, all economic damages, loss of business opportunities, embarrassment, mental anguish, loss of consortium, loss of services, loss of companionship, and loss of employment.

I warrant that I am in good health and have no physical condition that would prevent me from participating in the Activity. I fully realize, understand and agree that there are inherent risks, both foreseeable and unpredictable, associated with a walk and exercise including, but not limited to, injuries or death from falls, sprains, strains, fractures, heart ailments, the potential for being struck by a vehicle, windblown or collapsing scaffolding, barricades and signage, the effects of the weather, including high heat and/or humidity, high winds, lightning, and extreme cold, snow and ice, traffic and the conditions of the road, all such risks being known and appreciated by me. I further acknowledge that the organizers and Released Parties reserve the right to refuse or revoke my volunteering for the Activity. I agree to assume and accept full responsibility in spite of and with full knowledge of these risks. My participation in the Activity is completely voluntary and I acknowledge that the Released Parties make no representations about my safety or care.

IN CONSIDERATION FOR ALLOWING ME TO PARTICIPATE IN THE ACTIVITY AND/OR PRIZE, I, HEREBY HOLD HARMLESS, RELEASE, INDEMNIFY, AND DISCHARGE FROM LIABILITY THE RELEASED PARTIES FROM ALL LIABILITY, CLAIMS, JUDGMENTS, DEMANDS, CONTROVERSIES, AGREEMENTS, DAMAGES, ACTIONS, AND CAUSES OF ACTION WHATSOEVER, ARISING OUT OF OR RELATED IN ANY WAY TO THE ACTIVITY OR THE CONDUCT OF THE ACTIVITY WHETHER IN LAW OR EQUITY, NO MATTER WHAT THE CAUSE OR NATURE, AND I FURTHER WAIVE ANY CLAIMS THAT I MAY STATE OR ASSERT AGAINST ANY OF THE RELEASED PARTIES IN ASSOCIATION WITH THE ACTIVITY, ITS ASSOCIATED EVENTS, OR IN ANY WAY RELATED TO OR RESULTING FROM THE ACTIVITY EVEN IF SUCH INJURY OR CLAIMS RESULTS FROM OR IS CAUSED BY THE NEGLIGENCE OF ANY OF THE RELEASED PARTIES, IN WHOLE OR IN PART. I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASED PARTIES FROM ANY CLAIM ARISING OUT OF MY PARTICIPATION IN THE ACTIVITY.

I understand that by entering, submitting in the Activity, I have granted to the Released Parties, a perpetual, worldwide, non-exclusive, royalty-free, sub-licensable (through multiple tiers) right and license to use, publish, reproduce, display, perform, adapt, modify, distribute, have distributed and promote such content in any form, in all media forms, now known or hereinafter created, anywhere in the world, for any purpose. I acknowledge and agree that the Released Parties may subsequently use for publicity and/or promotional purposes, my likeness, photographs, videotapes, other recordings or media or name without any additional consideration to me beyond allowing participation in the Activity.

I certify I am over the age of 18 individually, or as parent of any minor, and am legally competent to sign this Release Agreement and I understand that the representations contained in this Release Agreement are contractual and not mere recital. I have fully informed myself of and understand the contents of this Release Agreement and I have signed this document of my own free act.

If any provisions of this Release Agreement shall be deemed to be unenforceable and/or void, the remainder of this Release Agreement shall not be affected thereby and the remainder of this Release Agreement shall be fully enforceable.

Date: _____ Signature: _____

If you have a minor that is participating in Sista Strut 2013, please complete the following:

I, the undersigned parent or legal guardian of _____ ("Minor"), hereby execute the foregoing Waiver and Release for and on behalf of Minor and agree to bind myself, Minor and any heirs, next of kin, assigns or personal representatives to the terms of this Release. I represent that I have full legal authority to act for and on behalf of Minor, and I agree to indemnify and hold harmless Released Parties for any expenses, claims or liabilities that may arise as a result of any insufficiency of my full legal authority to execute the foregoing Release.

Date: _____ Parent Signature: _____ Parent Printed Name: _____