

# Shoreline Stroll

International Maritime Center  
4001 7<sup>th</sup> Street  
Oakland, CA 94607-1043

Saturday, September 16, 2006  
Registration 9:00 a.m.

Shoreline Strollers Information

Church/Group Name (if walking as part of a church or group team)

\_\_\_\_\_

Stroller's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E Mail \_\_\_\_\_

## For Seafarers Ministry of the Golden Gate

Please give your donation now and save the volunteer a return visit

Remember to Make a  
Copy of This Form for  
Your Records

**Waiver:** In consideration of the acceptance of my entry, I, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damage I have or may hereafter have against the organizers of this event, its principals, its employees, its volunteers, all sponsors, and their representatives, and any and all claims of damages, demands, actions whatsoever in any manner, as a result of my participation in the Shoreline Stroll event, including travel to and from this event. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and I have not been advised otherwise by a qualified medical person. Further I hereby grant full permission to any and all of the foregoing to use my name and likeness in any broadcast, telecast, video or print media of the event without compensation to me. I understand that the entry fee and numbers, if any, are nontransferable.

Signature \_\_\_\_\_

Date \_\_\_\_\_

All entrants (parent/guardian if under 18 years) must sign.

Donations are **tax deductible**: Make checks payable to **Seafarers Ministry of the Golden Gate**

Donor Name	Address, City, Zip	Phone	Total Pledged	Fill in only when paid
1.				
2.				
3.				
4.				
5.				
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11.				
12.				
13.				
14.				
15.				

Turn in \$75 in collected pledges on the day to receive a T-shirt. Limit ONE T-shirt PER STROLLER.

PLEASE TOTAL

Total Pledged Total Paid