



# Caregiver Registration Form

American Cancer Society  
Relay For Life of Central Bucks Middle Schools  
May 19, 2018  
[www.relayforlife.org/pacbmiddle schools](http://www.relayforlife.org/pacbmiddle schools)

**Relay For Life of Central Bucks Middle Schools**  
**Survivor & Caregiver Breakfast: 9:30 AM**  
**Survivor & Caregiver Group Photo: 11:00 AM**  
**Opening Ceremonies: 12:00 PM**



**Who is a caregiver?** A caregiver is someone who is currently caring for, or who has cared for someone with cancer. In the last several years, the Relay for Life of Central Bucks Middle Schools has welcomed hundreds of caregivers each year to walk in our celebration. Please register to be a part of this amazing community event! *Current 8<sup>th</sup> or 9<sup>th</sup> grade CBMS students may not register as caregivers, however they are still welcome to join the breakfast with their survivors.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

**WAIVER: Each Participant MUST read and sign.**

- As a participant in Relay For Life and the Survivor and Caregiver Lap, I, for myself, my executor, administrators, and assigns, do hereby release and discharge the American Cancer Society, the event site, their management, their officers, members, sponsors, organizers, or their representatives, or their successors, and all cooperating businesses and organizations from all claims of damages, demands, actions, and causes whatsoever, in any manner arising or growing out of my participation or that of my child in this event.
- I give my full permission for the use of my name and photograph in this event.
- I also give my full permission for such first aid as is deemed necessary to be provided to me or my child on the premises or prior to transport to a hospital for further treatment.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Signature of parent or legal guardian if child is under 18)

\_\_\_\_\_ I do NOT need a new caregiver shirt

\_\_\_\_\_ I would like a new caregiver shirt (\$5 donation requested)

**My t-shirt size is:**

Small Medium Large X-Large 2X-Large 3X-Large 4X-Large

**\*\* TO BE GUARANTEED A T-SHIRT, YOUR FORM MUST BE RECEIVED IN PHILADELPHIA NO LATER THAN APRIL 25<sup>th</sup> \*\***

***Help us out! Mail this form directly to the address below, not to a CB middle school:***  
***American Cancer Society, Attn: RFL of CBMS 1626 Locust Street Philadelphia, PA 19103***