



Individual Registration Form – 2015

Name _____

Mailing Address _____

City _____ Zip Code _____ County/District _____

E-mail _____ Phone _____ Gender Male Female

Team Captain _____ Team Name _____

If this is a worksite team, please specify company/organization _____

Which age range are you in? (Check one)

- 17 and under
- 18 – 29
- 30 – 44
- 45 – 59
- 60 – 74
- 75 and over

Which of the following best describes you? (Check one)

- American Indian/Native Alaskan
- Asian
- Black/African American
- Bi-racial
- Hispanic or Latino
- Native Hawaiian/Pacific Islander
- White
- Other

I wish to participate in the Walk Kansas physical activity program for the purpose of physical fitness.

I understand that I should have medical approval from my health care professional if I:

- have chronic health problems such as heart disease or diabetes.
- have been told by my doctor that I have high blood pressure.
- have pains in my heart and/or chest area.
- have any physical conditions or problems that might require special attention in an exercise program.
- feel dizzy or have spells of severe dizziness.
- have a bone or joint condition, such as arthritis, that might be made worse by an exercise I am not accustomed to, or a vigorous exercise program.
- am a male over age 45 or a female over age 55 AND not accustomed to vigorous exercise.

I agree to accept full responsibility for any injuries I may sustain while participating in this program.

Participant Signature _____ Date _____

Parent/Guardian Signature (If under 18) _____ Date _____

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PUBLICITY RELEASE

- I authorize** K-State Research and Extension to record and photograph my image and/or voice for use in research, educational and promotional programs. I also recognize that these audio, video and image recordings are the property of K-State Research and Extension.
- No, I do not authorize** use of my individual image or voice.

Please complete and return this form to your local K-State Research and Extension office.



Kansas State University Agricultural Experiment Station and Cooperative Extension Service

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