

# cruising for kai - registration form - page 1

please fill out all information completely.

only one entry per family is needed.

include every family member to ensure everyone who requests one receives a t-shirt.

**registration fees:**

- adults - \$15 or \$20 with t-shirt
- children age 4 to 18 - \$10 or \$15 with a t-shirt
- children under 4 – free or \$5 with a t-shirt

**you do not need to cruise to attend the event. non-cruising event fees:**

- adults - \$5 or \$10 with a t-shirt
- children age 4 to 18 - \$3 or \$8 with a t-shirt
- children under 4 – free or \$5 with a t-shirt

**submitting the form:**

pre-register for the cruise by filling out this form. mail it and your entry fee to the following address:  
 jennifer lueck  
 532 n 28 st  
 sheboygan, wi 53081

**walk-up registrations are allowed the day of the event. no extra fee will apply.**

family name				
cruising in honor of: only if you are comfortable in providing, we will list the name in our closing memorial the day of the event.				
address				
city, state, zip				
phone				
e.mail				
family member name	run or walk please circle one	child age	t-shirt size	fee
	Run/walk			
	Run/walk			
	Run/walk			
	Run/walk			
total entry fee: make checks payable to kai lueck cruise benefit		\$		

**available t-shirt sizes: child – s, m      adult - s, m, l, xl, xxl**

**for questions on this form, please contact jennifer lueck at 920.980.4254**

## **cruising for kai - registration form - page 2**

### WAIVER OF LIABILITY

I know that running or walking a race is a potentially hazardous activity. I should not enter and participate, unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participating in this event including, but not limited to: falls, contact with other individuals, the effects of the weather, conditions of the course and all other such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I and everyone entitled to act on my behalf, waive and release Word of Grace Community Church, HALO, workers, City of Sheboygan Falls, and any all other others related to the course location, all sponsors and/or the above listed representatives and successors from all claims or liability of any kind arising out of my participation in this event.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_