

Presented by Humana and the City of Jacksonville

# Walk For Senior Wellness

**Saturday, March 18, 2017 at Metropolitan Park 2**  
(Near The Fire Museum @ 1406 Gator Bowl Blvd.)

**Walk:** The 1.5 mile route runs along Gator Bowl Boulevard and the scenic St. John's River, and finishes at Metro Park 2.

**Lunch:** After the walk, enjoy lunch and the chance to win great prizes!

**Register:** Please be sure to complete the registration form by March 6th to secure your free lunch and t-shirt. All those entering must participate in the walk.

**A Special Thank You To Our Sponsors:**



**Humana**

**island  
DOCTORS**

## Activities Schedule

9:00 a.m.: Check in at Metro Park 2  
(1406 Gator Bowl Blvd.)

9:45 a.m.: Warm Up & Stretches

10:00 a.m.: Walk Begins

11:00 a.m.: Greetings

11:15 a.m.: Lunch & Door Prizes

(First 500 participants will be registered. Must be 60 or over and live in Duval County.)

Sorry... no children or on-site registration.)

For More Information Call  
630-7392 Or To Register Go To  
[www.jaxseniors.net!](http://www.jaxseniors.net!)

*The City of Jacksonville Walk For Senior Wellness Is Funded In Part By A City of Jacksonville Community Development Block Grant.*

## **REGISTRATION FORM (Must be turned in by March 6)**

Name \_\_\_\_\_ T-Shirt Size: S M L XL XXL

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

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

Telephone \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_

If you represent an organization, please list here \_\_\_\_\_

### **Emergency Contact (Must Complete In Order To Register)**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

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

**WAIVER on reverse MUST be filled out and signed in order to participate.**  
**Incomplete Forms Will Not Be Accepted.**

Over

Please complete and return to:  
Walk For Senior Wellness  
City of Jacksonville  
117 W. Duval St. Suite 220  
Jacksonville, FL 32202

**Release of Liability- 2017 Mayor's Walk for Senior Wellness**

I \_\_\_\_\_ (print name of individual who will be participating), and my assignees, executors, administrators, heirs and successors, do hereby agree to release, hold harmless, and forever discharge from any liability, the City of Jacksonville, Florida, as well as its members, officials, officers, employees and agents, for any claims, demands, causes of actions, judgments (including costs and expenses) or liability arising directly or indirectly from damages, bodily injury or death that I might sustain as a result of my voluntary participation in the 2016 Mayor's Walk for Senior Wellness.

I, the undersigned, do hereby acknowledge and understand that there are risks inherent in my participation in such a walk for senior wellness, and I assume all risks inherent therein and I agree to accept all responsibility for any injuries sustained by me as a result of my participation. I further acknowledge that I have been advised by the City of Jacksonville that I should consult with a physician or health care provider prior to engaging in the 2017 Mayor's Walk for Senior Wellness to assure that I am physically able to participate.

I fully understand and acknowledge that by executing this release I, together with my assignees, executors, administrators, heirs and successors, forever discharge any claims for liability or negligence against the City of Jacksonville, as well as its officials, officers, employees and agents, for damages, bodily injury or death that I might sustain as a result of my voluntary participation in the 2017 Mayor's Walk for Senior Wellness and any such claims will be forever barred.

I further acknowledge and understand that my participation in the City of Jacksonville's 2017 Mayor's Walk for Senior Wellness is entirely voluntary and not something I am required to do. I further acknowledge that during my participation in the 2017 Mayor's Walk for Senior Wellness that I will not be acting in the course and scope of employment with the City of Jacksonville but that I am participating on my own time.

Further, I grant full permission to any and all of the foregoing to use my likeness for any promotional purposes related to the event or for future events.

I have fully read and understand the aforementioned release or liability and agree to its terms. All terms of this agreement are contained herein and there are no other terms to this agreement.

\_\_\_\_\_  
Print Name (Participant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Participant's Address