



RIDGWAY AREA SCHOOL DISTRICT 2009-2010 WALKING PROGRAM

November 2, 2009 – April 1, 2010
3:30 PM – 7:30 PM

1. This club is for WALKERS only.
2. Entrance to the building is restricted to the auditorium entrance only. When there are events scheduled, participants may have to walk between the gates. Only participating members of the club will be permitted in the facility during the activity.
3. There will be a sign in sheet by the coat rack. **Walkers are required to sign in upon entering the building and to sign out upon leaving the building.**
4. It is recommended that all walkers walk in the SAME direction. Please walk to the right of the hall to avoid any mishaps. Approximately 7 trips around the upstairs hallway equals 1 mile.
5. If school is cancelled, that day's walking session is also cancelled. Walking **will not be permitted on the following days** due to school closings or scheduled events taking place at the high school. (Additional days will be posted as necessary)

2009

November	5, 6, 26, 27, 30
December	1, 23, 24, 25, 28, 29, 30, 31

2010

January	1, 18
February	19, 22, 23
March	18, 19



2009-2010 WALKING PROGRAM REGISTRATION & WAIVER FORM

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____

In consideration for being provided with an area in which to participate in the sport of walking, and in consideration of being provided access to and use of facilities for the purpose of engaging in the sport of walking, I do hereby waive and release any and all claims for myself, executors, and administrators of my heirs against the Ridgway Area School District, its successors, or assigns for any claims of injury, damage, illness, or loss which may directly or indirectly result from my participation in the activity upon the premises of the Ridgway Area School District arising out of my use of its facilities for the WALKING CLUB, including entrance to and exiting from the premises.

I further state that I agree that the Ridgway Area School District, its successors, or assigns, are not under any obligation to provide a physical examination; and I further execute this waiver and release voluntarily, intelligently, and knowingly, with the understanding that I hereby release the Ridgway Area School District, its representative, its successors, and assigns, from any and all liability for any injury, damage, illness or loss that may arise out of my use of the premises and equipment provided therein.

Signature: _____ Date: _____

Parent's Signature Required (if member is under 18 years of age)

Signature: _____ Date: _____