



VICTIMOLOGY CLUB

Please print and complete this form and mail in with your registration payment and donations to:

**University of New Haven
Attn: Judi Yale
Advancement Office
300 Boston Post Road
West Haven, CT 06516**

(Checks payable to: UNH - The Jessica N. Santos Memorial Scholarship)

First 100 registrants will receive a Walk Tee-Shirt

Number of Adults (16 and up) _____ x \$20.00 each UNH Students _____ x \$5.00

Children (1-15) are free but additional donations are appreciated.

Total enclosed \$ _____

Name: _____

T-shirt size:

Address: _____

M L XL

Phone: _____ Email: _____

Name: _____

T-shirt size:

Address: _____

M L XL

Phone: _____ Email: _____

Name: _____

T-shirt size:

Address: _____

M L XL

Phone: _____ Email: _____

WAIVER: *I hereby waive all claims against The University of New Haven & West Haven PD, event sponsors or personnel for any injury, loss or damage to my person or property while participating in this event. I acknowledge having read, understood and agree with the terms of this waiver.*

Signature of Participant

Parent/Guardian if under 18