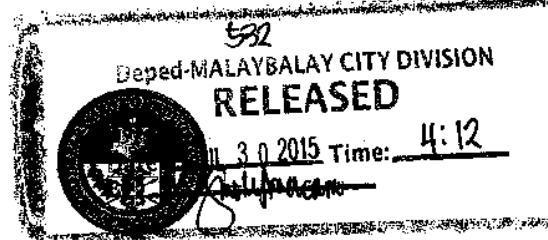




Republic of the Philippines  
Department of Education  
Region X – Northern Mindanao  
**DIVISION OF MALAYBALAY CITY**

Purok 6, Casisang, Malaybalay City

Telefax # 088-314-0094, E-mail add: [depedmalaybalay@gmail.com](mailto:depedmalaybalay@gmail.com)



July 28, 2015

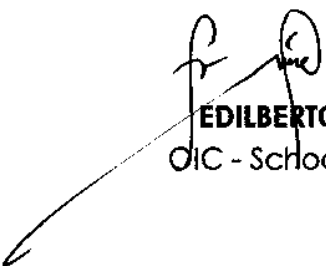
**DIVISION MEMORANDUM**

No. 266 s. 2015

**ADDENDUM TO DIVISION MEMORANDUM NO. 257, s. 2015 RE: 2015 DIVISION  
NATIONAL DISABILITY PREVENTION AND REHABILITATION (NDPR) WEEK CELEBRATION**

**TO: Education Program Supervisors/Division Coordinators  
Public Schools District Supervisors  
Public Elementary and Secondary School Heads  
All Others Concerned  
This Division**

1. In compliance to DepED Memorandum No. 257, s. 2015 and Division Memorandum No. 257, s. 2015 Re: National Disability Prevention and Rehabilitation (NDPR) Week Celebration with the theme *Health and Wellness Opportunities for Persons with Disabilities Towards an Inclusive Development of All*, **this Office hereby provides a suggested format of the Registration Form to be accomplished and signed by the interested adult and student participants of the "PULAGOY HU DALUMAN – For a Cause" on July 31, 2015 at 6:00 o'clock in the afternoon.**
2. **Accomplished Registration Forms must be submitted on or before July 31, 2015, 5:00PM to your respective Public Schools District Supervisor or to Ms. Giselle Ann D. Dicatoria, MCCS SPED Teacher, activity secretariat. Assembly area is at Malaybalay City Children's Park, Malaybalay City.**
3. Immediate dissemination of this Memorandum is desired.

  
JUL 30 2015  
**EDILBERTO L. OPLENARIA, CESO VI**  
OIC - Schools Division Superintendent



# PULAGOV 3

## A NIGHT RUN FOR A CAUSE

*"Dagan ko, para sa kaugmaon mo!"*

Date: July 31, 2015

Time: 6:00 PM

Assembly Area: Malaybalay City Children's Park (Playground)

Organized by

**Malaybalay City Sped Teachers Organization**

Registration Fee:

\_\_\_\_\_

### REGISTRATION FORM

	5k	Sped	Elementary	High School	Adult	10k
Male	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Full Name: \_\_\_\_\_ Age: \_\_\_\_\_ Bday: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Number: \_\_\_\_\_

#### Waiver of Liability

By signing this registration form and participating in the night run, I agree to abide by the rules of the event and certify that I am/my minor child is physically fit to finish the race.

I understand that participating in this event may involve risk of fatal injury. I voluntarily assume all risk associated with my/my minor child's participation in the event or any activity associated with it.

Having read this waiver, I, for myself and anyone entitled to act on my behalf waive, and release the organizers, sponsors, and anyone involved in this event, from any and all liability for injury, death, or damages incurred by me/my minor child in connection with any aspect of the night run.

\_\_\_\_\_  
Signature over printed name/Date  
(Parent/Guardian if under 18 yrs. Old)

**Please provide your own head lamp or blinker**