

Walk of HEROes

Helping to Enable Recovery & Opportunity



Benefiting Mental Health, Developmental Disabilities and Addiction Services

2008 OFFICIAL WALK REGISTRATION FORM

All Walkers are required to complete this form.

Walk day registration is available! Please complete the form and bring your \$10 registration fee to the Walk of HEROes Registration table on Saturday, June 28. To pre-register, send the form and fee to DeKalb CSB Foundation, Inc. P.O. Box 1648, Decatur, GA 30031, or drop off at 445 Winn Way, 4th Floor, Room 450, Decatur, GA 30030 or complete and submit fee on-line at www.dekcsb.org.

WALKER INFORMATION

Last Name, First Name _____

Team Name _____

Mailing Address _____ City _____ State _____ Zip _____

Telephone _____ Email Address _____

A minimum \$10 donation is required to receive a t-shirt.

- Yes – I would like a commemorative Walk of HEROes t-shirt. My \$10 donation is enclosed.
 No – I do not want to donate \$10 and will Walk without receiving a t-shirt.

PLEASE CHECK ONE:

- I will walk as a Team Member. Please List Team Name _____
 I will form a team as Team Captain. Please send me a fundraising packet so that I can start raising money.
 I will walk as an individual; not part of a team.
 I will not be able to Walk, but want to raise funds for this great cause. Please send me a fundraising packet.

T-SHIRT SIZE – PLEASE CHECK ONE:

- ADULT S M L XL
 CHILD S M L XL

WAIVER

(Each participant must read and sign below):

I, the undersigned, agree to indemnify and hold the DeKalb CSB Foundation and the DeKalb CSB harmless from all cost, expense and liability arising out of my participation in the Walk of HEROes to benefit the DeKalb CSB Foundation. I do hereby waive all claims for damage or loss to me or my child's person or property which may be caused by any act, or failure to act by the Foundation, its officers, agents or employees arising directly or indirectly from my or my child's participation in this event; and I hereby assume liability for any loss, damage or other liability from such event. Important: Walkers under age 18 must have this form signed by a parent or legal guardian.

Participant's Name _____ Date _____

Guardian's Signature (if participant is under 18) _____ Date _____