

12th Annual Walk/Run^(5k) to Prevent Child Abuse

October 21, 2017

Pelican Preserve

10561 Veneto Drive, Ft. Myers 33913

6:30 am Registration / Run @ 7:45 am / Walk @ 8:00 am

- **Great Raffle Prizes**
Raffle Tickets on Sale On-Site
- **Free Food & Refreshments**
- **Music & Fun**
- **Vendor Tables (w/free giveaways)**
- **Dogs are Welcome (on leashes)**



Children's Network of Southwest Florida is the lead agency for foster care and adoption services in Southwest Florida. There are over 2,000 children who have suffered from abuse or neglect in Lee, Collier, Charlotte, Hendry and Glades Counties.

100% of funds raised for the Walk A Thon will directly benefit children who are at risk for abuse and neglect in our community.

In partnership with:



(Pledge Form on Back)

WALKER PLEDGE FORM

REGISTRATION FORM

Participant Name: _____

Team Name: _____ Team Captain: _____

Make checks payable to **Children's Network**. All contributions are tax-deductible. Thank you!

	Name of Pledge/Donor	Amount	CASH (Please X)	CHECK #
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				

ALL WALKERS ARE WELCOME TO WALK, REGARDLESS OF THEIR DONATIONS TOTAL. In order to receive a walker goodie bag (T-Shirt, etc.), your team must average at least \$50.00 in pledges per person. \$25.00 per person (T-Shirt Only). Please turn in this form and all funds received to your team captain.

PLEASE TURN IN ALL FUNDS & FORMS BY October 13, 2017. Team Captains and Individual Walkers that have pre-registered may pick up their t-shirts and bags, on or after October 16th, at Children's Network, 2232 Altamont Avenue, Fort Myers, FL 33901. Email: info@cnswfl.org for more information.

One form MUST be turned in for each walker

Yes! I'll Walk at the Walk to Prevent Child Abuse

I can't attend the Walk but will donate \$ _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

Team Name: _____

Team Captain: _____

Team Captains: To ensure accurate credit to your team's total, fill in Team Captain lines on all Registration and Walker Donor Sections before you distribute them to your walkers.

Individual Walker Team Walker Captain

T-Shirt Size: S M L XL XXL 3XL

Each Participant must read and sign below:

Waiver of Release and Liability:

I, the participant, intending to be legally bound and having read and understood the waiver in its entirety, hereby waive or release any and all right and claims for damages or injuries that I may have against the Children's Network of Southwest Florida, sponsors and their representatives and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during, or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees. I also authorize the use of photographs or videos that include my image for promotional, information, or other reasons deemed to be in the best interest of the event.

I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed Medical Doctor. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above waiver.

Signature: _____

PARENT OR GUARDIAN (IF UNDER AGE 18):

Signature: _____