

Walk in The Woods for Parkinson's – September 15, 2024

REGISTRATION/DONATION FORM

1. Make registration checks (\$20 per person) payable to: TAPSG (Torrington Area Parkinson's Support Group). Mail to TAPSG, P.O. Box 521, Torrington, CT 06790.
2. Write additional donor names, emails and amounts on back of form, with check(s) enclosed.
3. Mail completed forms, fees and donations to TAPSG (see above), or bring to registration on walk day.
4. Registrations **received by August 25, 2024** may receive a free t-shirt on walk day. Indicate size below.



WALK Date: Sunday, September 15, 2024

Time: Register at noon; walk at 1:00. (Picnic in the field throughout the day. Clean up your own picnic area.)

Place: White Memorial Conservation Center, 80 Whitehall Road, Litchfield, CT

Information: www.walkforpd.org, www.tapsg.org, or call Susan at 860-489-1677.

WALKER INFO

Last Name _____ First Name _____

E-Mail _____ Phone _____

City, State _____ I am part of a team Team Name/Company: _____

Registration Fee: \$20.00 per person made out to TAPSG.

No fee required for children 12 years and younger. All children must have adult supervision.

If registered by August 25, receive a free T-shirt on walk day. ✓ Check size S M L XL XXL

Mail forms and fees to TAPSG, P.O. BOX 521, Torrington, CT 06790.

WAIVER

I agree that I am participating in A Walk in the Woods voluntarily and do so at my own risk. I hereby fully release all parties connected in any way with this event from all claims or lawsuits for any injuries, death, property damage or theft, losses, or any other liability of any kind, arising directly or indirectly out of my participation in this event. I consent to being provided with emergency treatment in the event of my illness or injury during my participation in A Walk in the Woods, and agree not to hold the Fox Foundation or TAPSG responsible for any costs associated with such treatment. I consent to the publication and/or other use of my name, voice, photograph or other likeness without further notice or compensation in any publicity or advertisement carried out by TAPSG in any manner whatsoever, including print, broadcast, or the Internet. By signing below, I confirm that I have carefully read this Release and Consent and fully understand and agree to its contents.

Signature of Participant _____ Signature of guardian if under 18 years of age _____

DID YOU KNOW?

- Parkinson's disease is a chronic, degenerative neurological disorder that affects one in 100 people over age 60.

12:00 Registration

- The average age at onset of Parkinson's is 60, but people have been diagnosed as young as 18.

Field Activities; Ticketed Drawings;

Silent Auction; Bake Sale

- Parkinson's strikes men and women in every culture and race.

1:00 Walk, water and snack

(complimentary)

2:00 Announcements/ Prizes

- Recent research indicates that at least one million people in the people in the United States, and more than five million worldwide, have Parkinson's disease.

Donation Form for Family and Friends

WALKER INFO

Last Name _____ First Name _____

Please bring this form along with all donations to the event, or mail to TAPSG, PO Box 521, Torrington, CT 06790.

Name	Donation
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check
	\$
	<input type="checkbox"/> Cash <input type="checkbox"/> Check

10 Early Signs of Parkinson's Disease

- Tremor
- Small Handwriting
- Loss of Smell
- Trouble Sleeping
- Trouble Moving or Walking
- Constipation
- A Soft or Low Voice
- Masked Face
- Dizziness or Fainting