Walk in The Woods for Parkinson's - September 17, 2023

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 30, 2023** may receive a free t-shirt on walk day. Indicate size below.

in the state of th

WALK Date: Sunday, September 17, 2023

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

_____ First Name _____

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 ___

E-Mail		Phone
City, State		Team Name/Company:
☐ Registration Fee: \$20.00 pe No fee required for children 12 ye	-	
☐ If <u>registered by August 30</u> ,	receive a free T-shirt on	walk day. ✓Check size □S □M □L □XL□XXL
☐ Mail forms and fees to TAP	SG, P.O. BOX 521, Torrir	ngton, CT 06790.
release all parties connected in ar damage or theft, losses, or any of I consent to being provided with a Walk in the Woods, and agree not treatment. I consent to the public notice or compensation in any pul	ny way with this event from ther liability of any kind, ari emergency treatment in the t to hold the Fox Foundatio cation and/or other use of blicity or advertisement car uning below, I confirm that	s voluntarily and do so at my own risk. I hereby fully a all claims or lawsuits for any injuries, death, property ising directly or indirectly out of my participation in this event. It is event of my illness or injury during my participation in A on or TAPSG responsible for any costs associated with such my name, voice, photograph or other likeness without further tried out by TAPSG in any manner whatsoever, including print, I have carefully read this Release and Consent and fully

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

	WHAT TO KNOW	SCHEDULE
>	Parkinson's disease is a chronic, degenerative neurological disorder that affects one in 100 people over age 60.	12:00 Registration; Field Activities; Ticketed Drawings; Silent Auction; Bake Sale
>	The average age at onset of Parkinson's is 60, but people have been diagnosed as young as 18.	1:00 Walk, water and snack (complimentary)
>	Parkinson's strikes men and women in every culture and race.	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.	2:45 Clean Up 3:30 Empty Field, many thanks

Donation Form for Family and Friends

WALKER INFO				
Last Name Fi	rst Name			
Please bring this form along with all donations to the event, or mail to TAPSG, PO Box 521, Torrington, CT 06790.				
Name	Donation			
	\$			
	□ Cash □ Check			
	\$			
	□ Cash □ Check			
	\$			
	□ Cash □ Check			
	\$			
	□ Cash □ Check			
	\$			

☐ Cash ☐ Check

☐ Cash ☐ Check

☐ Cash ☐ Check

Name Donation

\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check
\$
□ Cash □ Check