Registration

There is no registration fee!
Register online! Visit www.voicesunited4change.org
for more details or REGISTER with this form the day of the Fun Walk. Bring this form with your donations even if you register online.

Required Waiver of Responsibility

I, the undersigned, acknowledge that my participation in the OC Children's Mental Health Awareness Walk is voluntary and that I am physically able to undertake this walk. I also waive and release any and all claims of responsibility that may arise out of participation in this event.

IMPORTANT: Walkers under 18 must have the signature of a parent or legal guardian.

PHOTO RELEASE: I allow use of images of myself in VU4C/DMH publicity materials.

Yes No	
Walker Signature and Date	
Trainer organization and Date	
Emergency Contact	
Relationship	Date

For more information contact:

Pat Savino, Outreach Coordinator, psavino@asfl.org

Telephone: 845-360-8280

Or Angela Turk, Director of Children's Services, OC Dept. Of MH

291-2610

Pledges and Donations

Your donation is tax deductible. VoicesUnited4Change offers their resources and supports without a fee or a charge.

(Please print)

VoicesUnited4Change and the Orange County Department of Mental Health

Children's Mental Health 5K Awareness Walk! May 2, 2015

warker 5 Name.				
Walker's Address:				
Telephone (optional): Email:				
, , , , , _				
Donor's Name	Address	Email Address	Amount	

Please complete one form per walker. This form may be duplicated as needed.

Please make checks payable to: Access: Supports for Living, and be sure to include VU4C on the memo line.



Walker's Name



