



# Paws for a Cause Community Dog Walk

## REGISTRATION FORM

A one mile walk with your beloved pooch(es) to benefit the Centegra Gavers Breast Center.

**Date:** Sunday, October 1, 2017 (rain or shine)

**Time:** 12:00 pm – 3:00 pm

**Location:** Hatchery Park, Spring Grove, IL

**Walk Begins:** 12:30 pm

**Light Refreshments:** 1:30 pm

**Raffles:** 2:00 pm

**WALKER INFORMATION:** (Must be at least 18 years to participate without a parent/guardian)

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
(Email will be used only for contact by committee members of the Paws for a Cause Community Dog Walk)

How did you hear about the event: \_\_\_\_\_

**REGISTRATION FEE:** First 100 walkers will receive a Paws for a Cause t-shirt, bandanna and goody bag. **Register by September 15, 2017 to guarantee your shirt size.** Pre-registration deadline is September 22, 2017, however you can register the day of the walk for \$25 per person.

**\$20.00 – one person and one dog** \$ 5.00 – additional dog T-Shirt Size (select 1) YM S M L XL 2XL (\$2 extra)

**\$50.00 – family and one dog** \$ 5.00 – additional dog T-Shirt Sizes (select 2) YM S M L XL 2XL (\$2 extra)

**Additional T-Shirts** \$12.00 (\$14 for 2XL) YM S M L XL 2XL

**TOTAL \$** \_\_\_\_\_

**DOG INFORMATION:** Limit two dogs per walker. We ask everyone to please practice responsible pet ownership, which includes picking up after your dog. Poop bags will be provided.

Dog Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

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All dogs must be current on rabies. All dogs must be dog and people friendly. All dogs must be on a leash 6ft or shorter. Female dogs that are in season are not permitted to participate. Please pick up after your dog. Poop bags will be available.

Waiver, Release and Indemnity Agreement for Paws for a Cause Community Dog Walk In consideration of acceptance of my entry, I hereby release, discharge, and agree to hold harmless Centegra Gavers Breast Center and their affiliates, Nature's Feed, Village of Spring Grove, any sponsors, officials or organizers of this event and each of them together with their successors, officers, agents, employees and volunteers from any and all liability for injuries to property or persons suffered by me as a result of my participation in this event. This includes, but not limited to injury, loss of property and any other claim arising from my participation and my pet's participation. By execution of this waiver, I assume all risks associated with my participation in this event and verify that I am physically fit for this event. I agree to indemnify any of the parties listed above for damages caused by me to any such party or parties and any third parties, by virtue of my participation in this event. I hereby grant full permission to any and all parties to use my name, pet's name in any broadcast, video, social media, print media or advertising of this event without compensation or obligation to me.

Walker Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(The walker signing is representing themselves and any other individuals being registered on this form)

**Make Check Payable & Send to:** Centegra Health System Foundation  
Attn: Theresa Bahl  
527 W. South St., Woodstock, IL 60098  
*Memo: Paws for a Cause*

**Contact Information:** Michelle  
(815) 474-4556  
[info@pawsforacausewalk.org](mailto:info@pawsforacausewalk.org)

**THANK YOU FOR YOUR SUPPORT!**

[www.pawsforacausewalk.org](http://www.pawsforacausewalk.org)

FACEBOOK - <https://www.facebook.com/PawsForACauseCommunityDogWalk>