

WALKER COLLECTION ENVELOPE

- I am already registered
- I am registering on Walk Day

Name: _____ **Adult** **Child (Under 18)**

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

Team Name: _____ **Team Captain:** _____

Walkers: Include the name of your Team and Team Captain to ensure that the money you raise is properly credited.

Waiver of Release and Liability:

I hereby waive all claims against NAMI, NAMI-NYC Metro, sponsors, or any personnel for any injury that I might suffer in this event. I attest that I am physically fit and prepared for this event. I grant full permission for organizers to use photographs of me and quotations from me in legitimate accounts and promotions of this event.

Each Participant must sign below.

Signature: _____ **Parent or Guardian:** _____

(if walker is less than 18 years of age)

Instructions:

1. Register online at www.namiwalksnyc.org or call 212.684.3365.
2. Request sponsorship from friends, family, co-workers, etc.
3. Mark amount of your pledge and your donors' contributions below.
4. Place cash and checks in this envelope.
5. Give envelope to your team captain or bring to the walk.
6. Mail any post-walk contributions to NAMI-NYC Metro.

Make all checks payable to NAMI-NYC Metro. All walkers are encouraged to collect their donations in advance and turn them in to their team captain prior to the Walk, or bring them on Walk day. Walkers are also encouraged to convert all cash to a check or money order. Cancelled checks serve as tax-deductible receipts.

| | Donor Name (First & Last) and Address - Please Print | Amount Collected Cash/Check | Amount Raised Online |
|---------------|--|-----------------------------|----------------------|
| 1. | <i>My own pledge is ...</i> | | |
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| TOTALS | | | |



ENCLOSED IN THIS ENVELOPE

TOTAL AMOUNT: _____

NAMIWalks Representative Signature

Walker Signature