



REGISTRATION FORM

Yes, I'd be happy to walk with Maryland NAMIWalks!

REGISTER ONLINE!

www.namiwalks.org/Maryland

Create a walk site and send emails to friends & colleagues!

Contributor	Phone	Address	City/State/Zip	\$ Amount
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

Name _____

Affiliate/County _____

Address _____

City/State/Zip _____

Phone _____

Email _____

ADULT ____ CHILD (Under 18) ____

Team Captain: _____

Team Captains: To ensure accurate credit to your team's total, please fill in the Team Name and Team Captain on all Registration Forms and Walker Donor Forms before distributing them to your walkers.

___ Individual ___ Team Member

___ Walk Day Volunteer

___ I cannot attend the walk, but enclosed my donation of \$ _____

___ Check Enclosed

___ Please bill my MC / Visa

Card No. _____ Exp. __/___

Each participant must read and sign below:

Waiver of Release and Liability:

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

Signature: _____

Parent or Guardian: _____

Name: _____ Phone: _____ Email: _____

Team Name: _____ Team Captain: _____ Affiliate: _____

Make all checks payable to NAMI MD. Please add Team name, Team Captain, and Affiliate on your check.

All walkers are encouraged to collect their donations in advance and turn them in to their team captain prior to the WALK, or to bring them on Walk Day. Walkers are also encouraged to convert all cash to a check. Credit card contributions can be accepted at www.namiwalks.org/maryland through each walker team page.

Visit us at our website:

www.namimd.org