



TEAM COMMITMENT/VOLUNTEER INTEREST FORM

Yes, I am interested in organizing a team of walkers to participate in NAMIWALKS Maryland on **May 21, 2016**.

If you will be a primary Team Captain for your team, please complete this section:

Name: _____

Phone #: _____ E-mail Address: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Please list the name of the family, business, organization, service provider or affiliate your team will be representing in the Walk:

Our team name will be (complete if known): _____

Our team goals are: Walkers: _____ Dollars: _____ (Number of walkers x \$100)

If you will be helping the primary team captain as an assistant team captain, complete this section.

Name: _____

Phone #: _____ E-mail Address: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Name of family, business, organization, service provider or affiliate your team will be representing:

Please note the name of your team's primary team captain(s): _____

If you do not plan to be a primary or assistant team captain, but you are interested in supporting the Walk in other ways, please complete the other side of this sheet.

Yes, I am interested in supporting the 2016 NAMIWALKS Maryland in the following ways:

_____ **Walking** and collecting donations in the Walk as a member of a team or as an individual walker not affiliated with any team.

_____ **Volunteering** to work the day of the Walk. (Tasks include setting up the walk site, registering walkers, serving refreshments, giving out event T-shirts, cleaning up after the Walk is over.)

_____ **Helping** to get other people and businesses that I know or have connections with involved.

_____ **Helping** to promote the Walk by scheduling a presentation at my work place or to a group or organization that I belong to.

_____ **Helping** to recruit companies or businesses in the community to sponsor the Walk by making a cash donation or donating good or services in support of the event.

_____ **Helping** to get food and refreshments (coffee, bottled water, juice boxes, sport drinks, bagels, donuts, snack foods, fruit, etc.) donated for the walk.

_____ **Helping** to get entertainment (music, clowns, jugglers, magicians, face painters, etc.) for the Walk.

_____ **Helping** in some other way. Please explain: _____

Here is my contact information:

Name: _____

Phone Number: _____ E-mail Address: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Please return this form to:

Ilisa Oman, Walk Manager
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events@namimd.org