



SATURDAY, JULY 29TH
MADISON, WI

1-Mile Walk Registration Fees

<i>New in 2017!!!</i>	
May 1 - June 30	<input type="checkbox"/> \$35
July 1 - July 28	<input type="checkbox"/> \$40
July 29	<input type="checkbox"/> \$45

ENTRY FORM

(one per person)

NAME _____ MALE FEMALE

First *Last*

BIRTH DATE _____ *(must be 12 years old by 07/29/17)*

(mm/dd/yy)

PHONE _____ EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

COMPANY/SCHOOL NAME _____

Are you a member of a team? NO YES, TEAM NAME _____

EMERGENCY INFORMATION (Required)

Any medical conditions or allergies? NO YES

Details _____

EMERGENCY CONTACT _____

RELATIONSHIP _____ PHONE _____

I AM PARTICIPATING: IN TRIBUTE TO _____

IN MEMORY OF _____

To SHOW SUPPORT FOR _____

SELECT ALL THAT APPLY

Transplant recipient Living donor Supporter Medical/healthcare professional

Deceased donor family member/friend Family member/friend of a recipient/living donor

Other _____

➔
OVER

