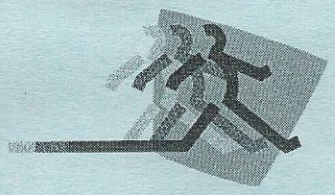
16th ANNUAL

ZUMBRO FALLS CANCER WALK-A-THON



Proceeds to benefit cancer related illness and charities

Registration and Sponsorship Information

Saturday, September 14, 2013
10 a.m.

Sponsored by:

Scooter's Bar & Grill
Zumbro Falls, MN

JOIN THE FIGHT – WALK FOR LIFE

The 16th annual Zumbro Falls Cancer Walk-a-thon is a fundraising event that will benefit cancer related illness and charities.

WALKER INFORMATION

Walkers should convene between 9:30 and 9:45 a.m. on Saturday, September 29 at the Zumbro Falls softball field, located just west of Highway 63 (follow the signs). Participants will then be shuttled to the South Troy Church to begin the event. The six-mile walk-a-thon will end at the Zumbro Falls softball field.

There will be a rest stop every two miles. Refreshments will be provided.

Walkers may register as a team. Each walker assumes the risks associated with the event. (See the waiver on the registration form.)

We will walk rain or shine!

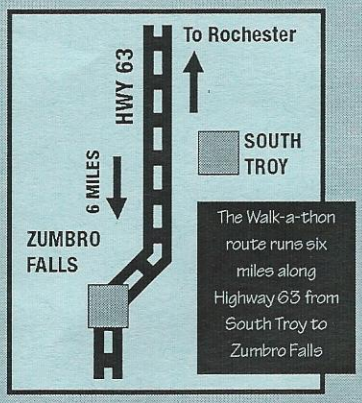
Walkers are urged to invite their family, friends and neighbors to come and provide encouragement along the route.

For information, contact
Darla Oelkers at 507-993-7802
Linda Arendt at 507-269-2128

OUR SPONSOR: SCOOTER'S BAR & GRILL

Post event at Scooter's Bar & Grill
Beginning at noon:

- Free lunch
- Door prizes
- Raffles
- Music by Doc's DJ
  - Noon to 4:00



We also thank Kennedy Bus Service of Zumbro Falls for donating their services.

REGISTRATION FORM

Yes, I want to participate in the 16th annual Zumbro Falls Cancer Walk-a-thon.
(Please Print) Please indicate if you are walking as a team. If so, team name:

Name _____

Address _____ City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Waiver: In consideration of being permitted to participate in this even, I hearby for myself, my heirs and personal representatives, assume any and all risks which might be associated with the event and I further waive, release, discharge and covenant not to sue the City of Zumbro Falls, its officers, members, sponsors, organizers; other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event of any related activities.

Signature _____ Date _____

If participant is under 18
Parent's Signature _____ Date _____

I'm walking in memory of _____

Registration form deadline: Must be mailed or turned into the registration table prior to walking on September 14, 2013

ZUMBRO FALLS CANCER WALK-A-THON SPONSORSHIP FORM

Walker's name _____ Team name _____

Please list the sponsor's name, phone number and pledge amount. Pledges must be mailed or turned into the registration table prior to walking on September 14. Pledges may be mailed to: Zumbro Falls Cancer Walk-a-thon, 602 South Prairie Street, Lake City, MN 55041. All checks should be made payable to Zumbro Falls Cancer Walk-a-thon.

	Sponsor name	Phone number	Amount	Paid
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Zumbro Falls Cancer Walk-a-thon
602 South Prairie Street
Lake City, MN 55041

Please affix stamp

ZUMBRO FALLS CANCER WALK-A-THON

Zumbro Falls Cancer Walk-a-thon
602 South Prairie Street
Lake City, MN 55041

	Sponsor name	Phone number	Amount	Paid
9.				
10.				
11.				
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