NAMIWalks MRegistration Form* National Alliance on Mental Illness

*A separate form is required for each Walker

Please fill out completely, checking the appropriate boxes.

Yes! I'll walk with NAMI Walks for the Mind of America!

Name:

Address:

City State Zip

Phone: Email:

_____Adult _____Child (under 18)

Team Name* (if applicable):

Team Captain* (if applicable):

*(Team Captains – To ensure accurate credit to your team's total, we encourage you to fill in the Team Captain lines on all Registration Forms and Contribution Forms before you distribute them to your Walkers. Thanks.)

I wish to participate in the Walk as...

Team Captain

Team Member

____Individual Walker

Walk Day Volunteer. Please call me.

_____ I cannot attend the Walk. I have enclosed my donation in the amount

of <u>\$</u>to support NAMI.

Check enclosed.

__Please bill my credit card: ____MasterCard ____Visa

Card No._____ Exp.____ CVC # _____

TAKE ONE STEP AT A TIME

1. Mail or Fax the Registration Form to NAMI Greater Milwaukee (address below).

2. Request sponsorship from friends, family, co-workers, etc.

3. Mark amount of your donors' contributions on Contribution Form.

4. Place checks and Contribution Form in an envelope.

5. Give envelope to your Team Captain, or bring to the Walk.

6. Mail any post-Walk contributions to NAMI Greater Milwaukee.

NAMI Greater Milwaukee

3732 W. Wisconsin Ave., Ste. 106 Milwaukee, WI 53208 414-344-0447 (Fax) 414-344-0450 www.namigrm.org

help@namigrm.org



Raise \$100 (per person) and receive a NAMI Walks T-shirt!

For Disability- Related Accommodations please notify NAMI Greater Milwaukee at 414-344-0447 or peterh@namigrm.org of your disability-related accommodation requests. We will attempt to honor all requests received.

Each Participant must read and sign below.

Waiver of Release and Liability

I hereby waive all claims against NAMI, NAMI Greater Milwaukee, 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.

Signature: