



3717 Springdale Ave., 1st Fl ● Baltimore, MD 21216 ● Tel: 410-664-4300 ● Fax: 410-664-2488 ● sustainplan@projectgarrison.org

## 2009 Registration Form [Page 1] Completion Of Part I Is REQUIRED BY EACH PARTICIPANT

A Participant\* who pre-registers by September 11, 2009 will be issued a FREE T-Shirt on September 26, 2008, on a first come first serve basis.

### Part I - Participant Information (REQUIRED BY EACH PARTICIPANT)

Please Type/Print Clearly

Name: \_\_\_\_\_

(Check one) \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE (Check one) AGE: \_\_\_\_\_ Less Than 18 Years Old \_\_\_\_\_ 18 Yrs and Older

T-Shirt Size: (Check one only) \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ XXXL

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### 2009 Recovery Walk & Rally Waiver of Liability and Photo Release

I understand that the NW Baltimore Drug Free Community Coalition, Project Garrison Inc., National Council on Alcoholism and Drug Dependence, Inc., Maryland Affiliation (NCADD), and Baltimore Substance Abuse Systems, Inc. (bSAS), shall not be responsible or legally liable for any loss of personal property or any bodily injury I sustain.

I hereby waive and release all rights and claims for damages I may have against the NW Baltimore Drug Free Community Coalition, Project Garrison Inc., NCADD of MD, bSAS, and their agents, employees, or volunteers, which may arise in conjunction with this event as a result of negligence or otherwise.

I give consent for the use of any photographs taken of me during this event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent's signature required if participant is less than 18 years of age.)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* Participants completing the **Volunteer Application** are asked to submit all forms together.

### Part II - Survey Question (Optional)

How did you find out about the 3rd Annual Recovery Walk & Rally? (Check all that apply) \_\_\_\_\_ An Affiliated Organization

\_\_\_\_\_ Flyer \_\_\_\_\_ Street Banner \_\_\_\_\_ Other (Explain) \_\_\_\_\_

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## 2009 Registration Form [Page 2] Optional

### Part III - Pledge Sheet For Walkers With Financial Supporters

#### Pledge Sheet Deadline September 11, 2009

As a Walker, you may want to encourage your family, friends, co-workers, etc. to support you in your walk for recovery. Please use this Pledge Sheet to collect, record and report all donations. In order to expedite processing we ask that you turn in your Pledge Sheet and all monies collected by September 11, 2009. Once you have collected donations, you must complete this Pledge Sheet and submit donations collected to Project Garrison's Office, or mail to: Sponsor Committee c/o Project Garrison, Inc., 3717 Springdale Avenue, Baltimore, MD 21216-1327.

Walker's Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Total Amount **COLLECTED**: \$ \_\_\_\_\_ Total Pledged Amount **NOT COLLECTED**: \$ \_\_\_\_\_

### My Supporters for 3rd Annual Recovery Walk & Rally

Please Print Clearly

Name	Address	Email	Phone #	Pledged	Collected
1.					
2.					
3.					
4.					
5.					
6.					
7.					
Please attach separate sheet for additional supporters.				<b>TOTALS</b>	

PROVIDED IN PARTNERSHIP BY:





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## 2009 Registration Form [Page 3] Optional

### Part IV - "Seeds For Recovery" Financial Contribution Form

Complete this Part if you are making a tax deductible donation **less than \$100** to help support Baltimore's 3rd Annual Recovery Walk and Rally on September 26, 2009. Contributions are accepted even if you cannot attend.

Please Type/Print Clearly

Name: \_\_\_\_\_  
Please fill-in the name of Organization **OR** Individual making this contribution

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

***If Your Contribution Is Between \$25 - \$99 And Received By September 11, 2009, You Will Be Recognized In The "SEEDS FOR RECOVERY" Section Of The Event Program.***

**Check Amount:** \_\_\_\_\_ \$75 \_\_\_\_\_ \$50 \_\_\_\_\_ \$25 Other \$ \_\_\_\_\_  
Make Check/Money Order payable to: "Project Garrison, Inc." In Memo Section Note "3rd Recovery Walk & Rally"

*On behalf of all participants, the Recovery Walk & Rally Steering Committee thank you for your support and contribution.*

*Please mail or bring this form along with your check or money order to:*

*3rd Recovery Walk & Rally Sponsor Committee  
c/o Project Garrison, Inc.  
3717 Springdale Avenue, 1st Floor  
Baltimore, MD 21216-1327*

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# Walk for Recovery!

**3<sup>rd</sup> Annual Recovery Walk & Rally!**  
JOIN THE VOICES FOR RECOVERY FROM ALCOHOL AND OTHER DRUGS

**Saturday,  
September 26, 2009  
8am-2pm**

**RAIN or  
SHINE**

**Beginning at:**

**The Lords Church of Baltimore  
5010 Park Heights Avenue**

**Ending at:**

**Frederick Douglass High School  
2301 Gwynns Falls Parkway**

**Honorary Chairs:**

**Martin J. O'Malley**  
Governor - State of Maryland

**Sheila Dixon**  
Mayor - Baltimore City

**Bishop Kevin Elliott**  
Pastor - The Lord's Church

**Curt Anderson**  
Delegate - 43rd District

**Peter A. Hammen**  
Delegate - 46th District

**William A. Bronrott**  
Delegate - 16th District

**Plus:**

**Guest Speakers • Live Entertainment  
Children's Fun Zone • Free Food**

**For more information call: 410.664.4300**

Or go to [www.projectgarrison.org](http://www.projectgarrison.org), [www.ncaddmaryland.org](http://www.ncaddmaryland.org) or [www.bsasinc.org](http://www.bsasinc.org)

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