



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: _____

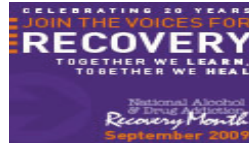
* Participants completing the **Volunteer Application** are asked to submit all forms together.

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) _____

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*

PROVIDED IN PARTNERSHIP BY:



Walk for Recovery!

3rd 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, www.ncaddmaryland.org or www.bsasinc.org

Provided in Partnership by:



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