



## THE END OF ALZHEIMER'S STARTS WITH **YOU**.

Held annually in more than 600 communities nationwide, the Alzheimer's Association Walk to End Alzheimer's® is the world's largest event to raise awareness and funds for Alzheimer's care, support and research. This inspiring event calls on participants of all ages and abilities to join the fight against the disease!

When you participate in Walk, your fundraising dollars fuel our mission, and your participation in the event helps to change the level of Alzheimer's awareness in your community. The Alzheimer's Association provides free, easy-to-use tools and staff support to help participants reach their fundraising goal. While there is no fee to register, we encourage participants to fundraise in order to contribute to the cause and raise awareness.

## **JOIN THE FIGHT** AGAINST ALZHEIMER'S DISEASE.

### **Start a team**

Sign up as a Team Captain online or complete the form on the back of this flyer.

### **Recruit**

Ask family, friends and co-workers to join your efforts.

### **Raise awareness and funds**

Use our online tools and other resources to make it easy to collection donations and spread the word.



## REGISTRATION FORM

Complete this form in ink and return it to your local chapter. To find your local chapter or Walk, visit [alz.org](http://alz.org).

I am a ☐ team captain ☐ team member ☐ individual

My goal is to raise \$\_\_\_\_\_ to help end Alzheimer's disease.  
(The recommended minimum goal is \$225.)

*\*Most Walk events ask for a fundraising minimum of \$100 per participant to receive a T-shirt. Contact your local chapter to confirm the T-shirt minimum for your Walk.*

Walk location   
Team name

First name	<input type="text"/>
Last name	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Zip	<input type="text"/>
Phone (Day)	<input type="text"/>
Phone (Evening)	<input type="text"/>
E-mail address	<input type="text"/>
Company name	<input type="text"/>
Job title	<input type="text"/>

☐ Yes, my company has a matching gifts program.

I'm taking the first step by supporting the Alzheimer's Association. Enclosed is my personal donation of: ☐ \$120 ☐ \$60 ☐ \$35 ☐ Other \_\_\_\_\_

To make a credit card donation, please go online: [www.alz.org/walk](http://www.alz.org/walk)

### Assumption of Risk, Release and Permission

Walk to End Alzheimer's® involves walking – an activity which may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic and conditions of the road. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including bodily and personal injury, death, property loss or other damages of any kind arising in any way out of my attendance or participation in the Walk to End Alzheimer's and related activities. It is my responsibility to dress appropriately. Although route maps, rest stops, refreshments and other assistance may be made available during this event, I am solely responsible for my own health and safety. I represent that I am physically fit and able to attend or participate in this event. I hereby for myself, my heirs, executors and administrators, release, discharge and agree not to sue Alzheimer's Association, its chapters, their respective officers, directors, volunteers, employees, sponsors and agents, from any and all liability, claims, demands and causes of action whatsoever, arising out of my participation in or attendance at this event and related activities – whether resulting from the negligence of any of the above or from any other cause. I agree that my assumption of risk and release hereunder shall be as broad and inclusive as is permitted under applicable law. If any portion of this agreement is held invalid, the remainder shall continue in full force and effect. I grant full permission in perpetuity to the organizers of this event to use, reuse, publish and republish my name and image as a participant in the event in photographs, video or other recordings. I have read, understand and agree to the terms of this agreement.

If Participant is a minor or acts in accordance with a legal guardian, the parent or guardian must sign and agree to the below:

*I am the parent and/or legal guardian of Participant, and I hereby consent to his/her participation. I have read the foregoing agreement, and I hereby agree on behalf of myself and Participant to its terms.*

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

Please help the Alzheimer's Association better serve our community by completing the following:

Gender ☐ Male ☐ Female ☐ I prefer not to answer

Birthdate

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Choose one ☐ African-American/Black ☐ American Indian/Alaskan Native ☐ Asian ☐ Caucasian/White ☐ Hispanic/Latino ☐ Native Hawaiian/Other Pacific Islander ☐ Two or more races ☐ Other race ☐ I prefer not to answer

Please select your highest level of education ☐ Less than high school degree ☐ High school graduate ☐ Some college ☐ Bachelor degree ☐ Post/Professional degree ☐ I prefer not to answer

T-shirt size ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large

☐ I would like to decline all prizes and donate the cost back to the Association. ☐ I would like to decline all prizes except for my event T-shirt.

How did you hear about this year's Walk? ☐ Television Advertisement ☐ Radio Advertisement ☐ Print Advertisement ☐ Web Advertisement ☐ Other Advertisement ☐ I saw poster or brochure in my community

☐ I was recruited at a Community Event ☐ I received information in the mail ☐ E-mail from Alzheimer's Association ☐ Phone call from Alzheimer's Association ☐ Alzheimer's Association Web site ☐ Facebook

☐ Twitter ☐ Family ☐ Friend ☐ Coworker ☐ My company ☐ Other \_\_\_\_\_

How many years (including this year) have you been participating in Walk? ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17 ☐ 18 ☐ 19 ☐ 20 ☐ 21 ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28 ☐ 29 ☐ 30 ☐ 31 ☐ 32 ☐ 33 ☐ 34 ☐ 35 ☐ 36 ☐ 37 ☐ 38 ☐ 39 ☐ 40 ☐ 41 ☐ 42 ☐ 43 ☐ 44 ☐ 45 ☐ 46 ☐ 47 ☐ 48 ☐ 49 ☐ 50 ☐ 51 ☐ 52 ☐ 53 ☐ 54 ☐ 55 ☐ 56 ☐ 57 ☐ 58 ☐ 59 ☐ 60 ☐ 61 ☐ 62 ☐ 63 ☐ 64 ☐ 65 ☐ 66 ☐ 67 ☐ 68 ☐ 69 ☐ 70 ☐ 71 ☐ 72 ☐ 73 ☐ 74 ☐ 75 ☐ 76 ☐ 77 ☐ 78 ☐ 79 ☐ 80 ☐ 81 ☐ 82 ☐ 83 ☐ 84 ☐ 85 ☐ 86 ☐ 87 ☐ 88 ☐ 89 ☐ 90 ☐ 91 ☐ 92 ☐ 93 ☐ 94 ☐ 95 ☐ 96 ☐ 97 ☐ 98 ☐ 99 ☐ 100

### What is your closest connection to the cause?

☐ I have Alzheimer's or dementia

☐ I am supporting or caring for someone with Alzheimer's

☐ I have lost someone to Alzheimer's

☐ I don't have a close connection but support the cause and a vision of a world without Alzheimer's

☐ I prefer not to answer