



2nd ANNUAL IN MEMORY OF WALK-A-THON

Saturday, September 20, 2008

Chastain Park, Atlanta

Registration begins at 8:30 a.m.

Red Parking Lot

WALKER INFORMATION

Thank you for participating in the second annual **In Memory Of Walk-A-Thon**. The purpose of this event is to bring about awareness that **CAR CRASHES** are the number one cause of teen deaths and also to remember teens that have died in car crashes. By taking part in this 3 mile event you will be honoring those teens.

WHAT DO I DO NOW?

GET SPONSORS. Take your sponsor sheet to your family, friends and neighbors etc. Your goal is to raise a minimum of \$100.00 for **It Won't Happen To Me**, a non-profit organization (all donations will be tax deductible), to help educate teens and their parents to the number one cause of teen deaths **CAR CRASHES**. **(There will be six awards for the walkers who raise the most monies).**

The cost of registration for the event is \$25. The \$25 registration fee can be waived for students if the minimum \$100.00 in sponsorship is raised. In order to make sure we have enough T-Shirts and Lanyards this is a pre-paid walk. You can pre-register at online at www.itwonthappentome.org/events.asp and submit forms and participation agreement along with donations by September 8, 2008. Make checks payable to **It Won't Happen To Me** or IWHTM, we accept Visa, MasterCard and Discover, please do not send cash. Any uncollected monies can be turned in the day of the event. Walk-in's will be accepted but there will be no guarantee of T-Shirts or Lanyards.

WHEN & WHERE

The **In Memory Of Walk-A-Thon** will be held on Saturday, September 20, 2008 at Chastain Park in Atlanta, Ga. on Powers Ferry Rd. Registration will be at the RED LOT the 4400 block of Powers Ferry Rd. Check our web site for maps. Registration begins at 8:30am.

For further information contact Bill or Diane Richardson at
(770) 207-9698 or email diane@itwonthappentome.org.
www.itwonthappentome.org



2nd Annual In Memory Of Walk-A-Thon
PARTICIPATION AGREEMENT
(This form MUST be turned in with registration)

NAME _____ **Date of Birth** _____

I understand that my consent to these provisions is given in consideration of the acceptance of this registration and for being permitted to participate in this event. I am a voluntary participant in this event and in good physical condition. I know that this event is a potentially hazardous and I hereby assume full and complete responsibility for any injury or accident which may occur during my participation in this event or while on the premises of this event, and I hereby release and hold harmless and covenant not to file suit against It Won't Happen To Me or Chastain Park or the City of Atlanta, its local affiliates, and any affiliated individuals, any sponsors and their agents and employees, and all other persons or entities associated with this event (the releasees) from any loss, liability, or claims that I may have arising out of my participation in this event, including personal injury or damage suffered by me or others, whether same caused by falls, contact with participants, conditions of the course, negligence of the releasees or otherwise.

Signature

Parent or Guardian if under 18