

REGISTER TO WALK

2nd Annual 5k Hunger Walk

Saturday, October 3, 2015 @ 1:00pm

Veteran Park, Smithsburg MD

\$20 per walker - \$15 per walker 18 and under

Start or Join a Team – Your participation in the “5k Hunger Walk” will not only be a fun, memorable experience, but it will directly affect the lives of a hungry neighbor in your community! Gather your friends, family and colleagues and form a walking team to increase your impact! Show some team spirit and come dressed to impress!

No teammates? No problem! Register as an Individual. Sign up as an individual and walk alongside the expected 200 + other participants. Be one of the first 100 people to register and receive a FREE tote bag!

All Participants are Encouraged to Fundraise – The “5k Hunger Walk” is a community walk but it is also an opportunity to increase awareness and ask for support for our mission in feeding hungry neighbors in Smithsburg. It’s easy to help Smithsburg’s Food Pantry continue to serve over 62 families weekly. Once you register, you will be able to customize your own fundraising page and send a personalized link to your family and friends so they can sponsor you! Just go to www.youcaring.com

Volunteer/Prefer to Cheer? Great! Register to be one of the many volunteers who make the 5K walk a memorable experience. Whether it’s helping with registration, directing traffic, set-up/tear-down or cheering on the participants, we’ve got a job for you!

Can’t walk with us? No problem! You can still register online as a “virtual” walker and be part of the event. Individuals, whether walking or not, are also encouraged to donate non-perishable food items that day for the Food pantry.

REGISTRATION TO WALK

Please mail to: Tabitha’s Table
PO Box 218, Smithsburg, MD 21783

NAME: _____ AGE: _____ GENDER: M / F

ADDRESS: _____ CITY: _____ STATE _____ ZIP _____

PHONE: _____ EMAIL: _____

WAIVER: In consideration of acceptance of this entry, I, the undersigned, intending to be legally bound, do hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against any and all race sponsors, Tabitha’s Table, town in which the race is contested, their representatives, successors, and assign for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and sufficiently trained for the complain of this event and my physical condition has been verified by a licensed Medical Doctor within the last six months. Further, I hereby grant permission to any and all foregoing to use any photographs, videotapes, motion pictures, recordings or any other record of this event for ANY PURPOSE whatsoever without compensation or remuneration. I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE FOREGOING PARAGRAPH. ALL ENTRANTS MUST SIGN TO PARTICIPATE

Signature of adult entrant (or guardian, if under 18 years)

Please direct all inquires to our Program Coordinator, Angela Griffin at 240.675.2050 or visit our facebook page or website www.tabithastable.com