

The CAP Walk

Bringing the Hispanic and African American families together to stop the Violence

The Forum
3900 W. Manchester Blvd.
Inglewood, CA 90305

April 8, 2006
8:00 AM -3:00 PM

Registration Form

Registration Fee: \$25.00

Name: _____

Address: _____

Phone: _____

E-Mail Address _____

Fundraising Goal _____

Team Name _____

T-Shirt Size (please circle) S M L XL 2XL

Form A Team! Teams are a great way to build enthusiasm and raise funds

Team Name: (*Therapy Designs*)

Team Captain(s) _____

Address _____

Phone: _____ Estimated number of team members: _____

Contact Person: _____ Phone Number _____

Fundraising goal: _____

Waiver:

I hereby wave all claims against The Child Abuse Prevention Walk (The CAP Walk) and event sponsors and personnel for any injury I might suffer in this event. I attest that I am physically fit and prepared for this event. I grant full permission for organizers to use photographs of me and quotations from me in the legitimate accounts and promotion of this event.

Signature

Date

Signature of Parent if minor under the age of 18

Please make all checks payable to The CAP Walk and mail all checks and registration forms to:

The CAP Walk
P.O. Box 91890
Los Angeles, CA 90009