

Walk for Safety; Walk for Hope

Registration Form

First and Last Name: _____

Organization Name (if applicable): _____

Mailing Address: _____

Telephone: _____

Fax: _____

Email: _____

I am:

Registering as an Individual

Registering as a Team

*New Team

*Add me to this existing team:

Team Name: _____ Team name: _____

Team Captain: _____ Team Captain: _____

I downloaded pledge form from www.heritagelineherbs.com

Please send me ____ pledge forms for collecting donations.

Please fax, email or mail your registration forms to:

Deb Benner

Walk for Safety; Walk for Hope

53443 Heritage Line, RR#1 Aylmer, ON, N5H 2R1

fax: (519)866-3442

email: heritagelineherbs@amtelecom.net