

## Hike for Life Sponsor Sheet

Please make checks payable to: Informed Choices, formerly Tri-County P&PS

[illegible]

Donation receipts will be issued to sponsors that pledge \$10 or more and provide complete, legible mailing information.

The **Hike for Life** is a way to show your support of the unborn and the women who find themselves in unplanned pregnancies.

**REGISTER at [www.tricountypps.org](http://www.tricountypps.org)**

Enjoy a great morning with the family by walking 3 miles to help reinforce and support the value of *life*.

## Registration Form

**REGISTER at [www.tricountypps.org](http://www.tricountypps.org)**

☐ Individual ☐ Family Registration (check one)

Church / Organization

Primary Registrant Name

Address

City / State / ZIP

E-mail

Daytime Phone

### Additional Family Members

Name Age

Name Age

Name Age

### Waiver and Release

Read this form carefully and be aware that in signing and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity.

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward may have (or accrue to me or my child) as a result of participating in this program/activity against Informed Choices, including its officials, agents, volunteers and employees. I do hereby fully release and forever discharge the Informed Choices from any and all claims for injury, damages, or loss that my minor child or I may have or which may accrue to me or my minor child and arising out of, connected with, or in any way associated with this program/activity. I have read and fully understand the above important information, warning or risk, assumption of risk and waiver and release of all claims. If registering by email, your email signature shall substitute for and have the same legal effect as an original form signature.

Signature of registrants over age 18

**Thank you!**

Thank you for supporting LIFE by participating in this year's *Hike for Life*! All proceeds benefit the Pregnancy Centers in Crystal Lake and Grayslake!

Images of Informed Choices events captured through video, photos, or digital camera become the property of Informed Choices.



**Informed Choices**  
Formerly: Tri-County  
Pregnancy & Parenting Services

**610-1 Crystal Point Drive**  
**Crystal Lake, Illinois 60014**  
**815-455-0965**

**888 E. Belvidere Road, Unit 124**  
**Grayslake, Illinois 60030**  
**847-231-4651**

**[www.tricountypps.org](http://www.tricountypps.org)**



Formerly:  
Tri-County Pregnancy  
& Parenting Services



**SATURDAY**  
**MAY 10, 2014**

**8:30 a.m. (rain or shine!)**

**Start from either:**

**Immanuel Lutheran Church**  
**300 S. Pathway Court, Crystal Lake**

**OR**

**Faith Church**  
**954 W. Brae Loch, Grayslake**

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