



**ST. PETER'S CARES WALK - 1-2.5 MILES – MAPS AVAILABLE
FUND RAISER FOR LOCAL NON-PROFIT**

JAK's PLACE

SATURDAY, OCTOBER 1, 2022 8:30 TO 10:30 AM

**ST. PETER'S LUTHERAN CHURCH 108 W. MAPLE STURGEON BAY, WI
(LARCH STREET ENTRANCE)**

Please complete one registration form for each walker and sign the waiver. Multiple registrations can be paid with one check. Pre-registrations must be received by Saturday, September 24. **Make checks payable to: JAK's Place**. JAK's Place is a community resource center with an inviting, encouraging and caring atmosphere focused on the needs, hopes, goals, and gifts of everyone who comes in our door. Through outreach, education and active programming, we seek to be both a refuge and a beacon for all those whose lives have been affected by mental illness. All monies will be donated to JAK's Place. Completed forms, along with checks, can be mailed to John Schopf, 230 N. Geneva Avenue, Sturgeon Bay WI 54235. If you have any questions call 920-495-3611. Pre-registration is \$20 for a single; registration day of event is \$25 and is available from 8:30 to 10:30. Family* is \$30 pre-registration and \$35 day of event. The walk is a staggered start beginning at 8:30 and starting no later than 10:30. Paid registration includes an insulated tumbler or zippered tote. Walk will be held rain or shine. If it rains, participants may walk in the gym.

Last Name _____ First Name _____

Address _____ Phone: _____

___ Pre-registration single \$20 by 9/24/22

___ \$30 family rate by 9/24/22

___ Day of Event \$25

___ \$35 day of event

*Immediate family-(parent/parents/minor children)

___ I can't walk, but would like to donate. I am including a donation of \$_____.

Waiver Release Form:

I understand and acknowledge that participating in the St Peter's Cares Walk is potentially hazardous, and that by entering and participating in the event, I am representing that I am medically able and sufficiently trained to participate in the event. I assume full and complete responsibility for any illness, injury, or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I am also aware of and assume all risks associated with participating included, but not limited to, falls, contact with other participants, effects of weather, traffic, and conditions of the road. I, for myself, and anyone on whose behalf I am executing this release, hereby waive, releases, agree to indemnity and defend, and to forever discharge JAK's Place and St. Peter's Lutheran Church and assigns from any and all liabilities, claims, actions, costs, expenses, or damage arising out of, or related to, participating in the St. Peter's Cares Walk, even if such claim or liability arises out of the negligence or carelessness on the part of the released parties.

Signature

Date

Signature of Parent/Guardian if under 18 years of age

Date