

Return Services Requested



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 *Walk Life*
FOR
2018

SEPTEMBER 15TH • REGISTRATION: 8:30 AM • WALK BEGINS: 9:00 AM
The Care Center • 285 Main Street, Dayton

It's easy!

- Collect no money!
- Only a two mile walk – bring the whole family.
- Come rain or shine.
- Free T-shirt for \$200 in pledges!
- Walk on your own if you can't join us.

Step One: Register online, by mail, by phone, or with your group leader TODAY.

Step Two: Ask EVERYONE you know to sponsor you. You will be amazed how many will say YES!

Step Three: Please be sure all names and addresses are complete and easy to read. Bring your completed Pledge Form(s) the day of the Walk (or walk on your own and mail it in). Don't collect any money. We'll handle the billing.



Your support helps provide accurate information and compassionate assistance to over 5,000 men, women and students every year. We offer comprehensive, positive alternatives to abortion. We provide at no cost to our clients:

- Pregnancy testing and limited ultrasounds
- On-going pregnancy support
- Material assistance
- Parenting Classes
- Christ-centered peer counseling
- The EDGE Program to schools, churches, and other organizations
- 24 hour help-line through Option Line
- Post-abortion restoration counseling



Questions?
423-775-0019
or thecarecentertn.org

Written in secret.
EVERY hair *Counted.*
Valued above rubies.
A life known by **GOD.**



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SPONSOR PLEDGE FORM

My Goal _____ Total Pledges _____

Please Print Clearly!

Pre-Registration

Bring this completed form to the walk. You may photocopy this form for additional pledge space or download a PDF from our website.

Walker's Name _____
 Address _____
 City _____
 ST _____ Zip _____
 Phone _____
 Church/Group _____
 Email _____

No need to collect money. We handle the billing for anyone that is unable to pay at the time of their pledge! (\$10 minimum for us to bill, please)

Questions?
 423-775-0019

The Care Center
 285 Main Street • Dayton, TN 37321 • thecarecentertn.org

Please print all information clearly. Make check payable to The Care Center.

<input type="checkbox"/> PAID <input type="checkbox"/> BILL ME	First _____ Last _____ Address _____ City _____ ST _____ Zip _____ Email _____ <input type="checkbox"/> \$25 <input type="checkbox"/> \$35 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____	<input type="checkbox"/> PAID <input type="checkbox"/> BILL ME	First _____ Last _____ Address _____ City _____ ST _____ Zip _____ Email _____ <input type="checkbox"/> \$25 <input type="checkbox"/> \$35 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____	<input type="checkbox"/> PAID <input type="checkbox"/> BILL ME	First _____ Last _____ Address _____ City _____ ST _____ Zip _____ Email _____ <input type="checkbox"/> \$25 <input type="checkbox"/> \$35 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____
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Pre-Register online today!

Or fill out this form and mail it in!
 Let us know you're coming!

Name _____
 Address _____
 City _____
 ST/Zip _____
 Phone _____
 Church/Group _____

Email Address _____

I am : Adult Teen Child

Have you walked in a Walk For Life before?
 Yes No

Shirt Size needed (circle one):

Child: **M L**
 Adult: **S M L XL XXL**

I am unable to walk, but will make a donation of \$ _____
 (Please make check payable to The Care Center.)

Please send me _____ additional brochures to distribute at work, church or school.

I release this organization from any liability for this event:

Signature (Parent if minor) _____

Return this form to:
The Care Center
 285 Main Street • Dayton, TN 37321
 Or pre-register by phone, email, or online.

Questions?
 423-775-0019
 or thecarecentertn.org