



Team/Individual Registration & Waiver

Name of Team/Individual: _____

Name of Team Captain (if applicable): _____

Address: _____

City: _____ Province: _____ Post Code: _____

Phone #: _____ Email: _____

Website: _____

Location of Walk (if not at Eco Adventures): _____

Total Amount Remitted by Team/Individual: \$ _____

Team Captains/Individuals are responsible for collecting money and remitting it with the completed sponsorship form to Ralph's Retreat at Long Point Eco Adventures, 10:30am on Sunday October 21st, 2018. All participants must read and sign the waiver below.

Information for Team Members

1. Pledges are flat rate amounts, not based on number of Kms walked. We will be walking approx. 3kms on Eco Adventures' trails.
2. Please remit all pledge forms and money at the start of the walk.



TEAM MEMBERS PAGE

Please direct any questions to ralphysretreat@gmail.com
or call 519-420-1364.

In agreeing to walk, and in signing this release, I acknowledge and understand its intent, and I agree to hold harmless Ralphy's Retreat Animal Sanctuary, corporate sponsors, Long Point Eco Adventures, cooperating organizations and any other parties connected with this event in any way, singly or collectively, from and against any liability for an injury, misadventure, harm, loss, or damage suffered or sustained as a result of participation in Wellies & Wine or any associated activities. I consent to and permit emergency treatment to be administered to me in the event of injury or illness at the event. I also give my permission to Ralphy's Retreat Animal Sanctuary to use my name and/or image in connection with this event.

Participants' signatures below indicate that they have read and agree to this waiver:

Team Member	Phone Number	Email Address	Signature	\$ Raised

Thank you for supporting Ralphy's Retreat Animal Sanctuary Welly Walk 2018



PLEDGE FORM

Name of Participant: _____

Name of Team (if applicable): _____ Page # (if more than 1 sheet used): _____

Pledge/Sponsor	Contact	Amount \$	Method of Payment	Total



PLEDGE FORM

Name of Participant: _____

Name of Team (if applicable): _____ Page # (if more than 1 sheet used): _____

Pledge/Sponsor	Contact	Amount \$	Method of Payment	Total

Thank you for supporting Ralphy's Retreat Animal Sanctuary Welly Walk 2018