

Ready to **walk?**



LOWCOUNTRY ROCKIN' THE PINK BREAST CANCER WALK REGISTRATION FORM

YES! REGISTER ME FOR THE WALK

OCT. 14, 2017 | 9 a.m. | \$20 | T-shirts \$10

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

EMAIL _____ PHONE _____

SIGNATURE _____ DATE _____

Fill out one form per person or register online at rockinthepink.weebly.com

WOULD YOU LIKE A T-SHIRT?

(\$10 each/\$15 2XL)

YES! Adult _____ Youth _____

No, thanks

PAYMENT

(Checks payable to BTFD Auxiliary)

Check \$ _____ Check # _____

Cash \$ _____

I'm registering as a

(circle all that apply)

WALKER | SURVIVOR | TEAM

VOLUNTEER | DONATION ONLY

EMERGENCY CONTACT

NAME _____

PHONE _____ RELATIONSHIP _____