Walk-A-Thon Registration Form

Walker Name Address City State Zip

Emergency contact Address Phone

I understand that all pledges are collected in the name of _____to be sent to the National Federation of the Blind of Greater Springfield Inc. P.O. Box 3512 Springfield MA. 01101-3512.

Greater Springfield Chapter of the National Federation of the Blind and or Van Horn Park is not to be held Responsible for damages or injuries to myself or my personal property.

_____ _____

Walker's Signature Signature of Parent or Guardian if under 18

Name	Address	Pledge	Collected
1.		$	$
2.		$	$
3.		$	$
4.		$	$
5.		$	$
6.		$	$

Please make checks payable to "Greater Springfield Chapter, NFB." For more information visit our website **WWW.NFBMAGS.ORG**or call the Walk-A-Thon committee at (413) 733-5547**.**

Thank you for your generous donations.