



September 20, 2008 PUT YOUR BEST FOOT FORWARD.

Send the completed registration form to the SOS Walk office or register online at:
www.soswalk.org/register.

If you are walking as a member of a team, you must have the team name on the registration form for the team to receive credit. Sign up as many sponsors as possible. Suggest \$3.00 or more per kilometer, or a flat donation. Pledge sheets should be filled out completely. Enter your own pledge first and get extra forms for your family and friends to join the Walk.

Collect from your sponsors as soon as possible. Show them your verified route card and ask them to make checks payable to "National SOS Walk". Convert all cash contributions to a money order. Mail checks and money orders with a copy of the pledge form to the SOS Walk office. Please include your return address on the envelope. Team walkers should also include their team name on the envelope.

During the Walk you must walk on the official route, obey all traffic signals, and please don't litter. Dress comfortably. Wear comfortable shoes and cotton or wool socks. Refreshments will be available at the midpoint and at the end of the route.

IMPORTANT:

When you feel you can't walk any further, stop!! Transportation will be available to return you to the starting point. Please let us know in advance if you require any handicap assistance.

THANK YOU FOR YOUR PARTICIPATION!

A vital part of the fund raising effort is the collection of pledges by participants. The goal of \$300,000 can be reached if each participant solicits sponsor donors.

*Prizes will be awarded to the participants & teams that raise the most money through confirmed donations!

Individual Incentives - The prize(s) that you can earn are based on the fundraising levels listed below.

Level	Raise	Receive
7	\$10,000+	26" LCD HD TV or GPS Unit or LCD Monitor or \$500 Gift Card
6	\$5,000 - \$9,999	7.1 MP Digital Camera or Camcorder or MP3 or \$250 Gift Card
5	\$2,500 - \$4,999	Portable DVD Player or Portable Hard Drive or LCD Photo Frame or \$150 Gift Card
4	\$1,000 - \$2,499	Keyboard/Mouse or Flash Drive or InkJet Printer or \$75 Gift Card
3	\$500 - \$999	Clock Radio or Weather Station or Wireless Mouse or Gift Card
2	\$250-\$499	Clock Radio or Weather Station or Wireless Mouse or Gift Card
1	\$100+	Official National Stomp Out Sickle Cell T-Shirt

TEAMS:

The 1st place company or organization team in each category will receive an award. **A minimum of \$2,000.00 is needed to qualify. All team members are eligible to win individual prizes if the particular member raises a specific award amount.** The team member must raise the minimum of \$100 for the incentive prize.

Awards are based on the amount of money turned in by Wednesday, September 17, 2008 before 5:00 p.m. These awards will be given during the 2008 Walk-A-Thon event.

TEAM CATEGORIES:

Corporations • Medical/Health • Small businesses
Public/government agencies • Educational Institutions
Churches • Fraternities & Sororities • Clubs & Organizations
Banking Institutions

For more information or questions,
please call SOS Walk at (301) 292-3682 or
visit us at www.soswalk.org

National Stomp Out Sickle Cell Walk 2008
P.O. Box 41479 • Washington, DC 20018-0879

Starts at
Howard University Hospital
Midpoint at
Children's National Medical Center
Ends at
Howard University Hospital



Walk-A-Thon

September 20, 2008
8AM-12NOON
3K Walk-A-Thon

Coordinators

- Children's National Medical Center, Center for Cancer and Blood Disorders
- DC DOH/ CHA/ Sickle Cell Program
- District of Columbia Greater Access to Pediatric Sickle Cell Services, Howard University
- Faces of Our Children, Inc.
- Georgetown University Hospital, Div. of Ped. Hematology/Oncology
- Howard University Center for Sickle Cell Disease
- Howard University Hospital
- Lauren D. Beck Sickle Cell Foundation, Inc.
- Sickle Cell Assoc. of the National Capital Area, Inc.



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September 20, 2008

8AM-12NOON

3K Walk-A-Thon



Walk-A-Thon

Official 2008 Entry Form

Registration entry fee required before the day of the event. Registration fees are: \$20 Adult; \$15 Students/Children; \$5 Children under 12. Register one of 3 ways:

1. Mail in your signed registration form and the fee to the SOS Walk office. Unsigned entry forms will not be accepted. Mail in registration must be postmarked by Friday, September 5, 2008.
2. Register online at <http://www.soswalk.org/register.html>. Online registration ends Friday, September 5, 2008
3. Register the day of the event. Bring your signed registration form to Howard University Hospital. Registration fee the day of the event is \$30.

*If you need to be sponsored for the walk, please contact Barbara Harrison at bwharrison@howard.edu or call 202-806-6329 by Friday, September 12, 2008. If you can sponsor someone to walk, please log on to www.soswalk.org, and click on "Sponsor a Walker".

First Name Last Name

Street Address

City State Zip code Birth date / /

F. M. () ()

Sex Age Home Phone Business Phone

E-mail Address

Employer/School/Organization Incentive T-Shirts (Those raising over \$100)

I am interested in organizing a team.

T-shirt size
S M L XL XXL XXXL XXXXL

I am part of a team.

Team Name Team Captain

I am only interested in volunteering

I can not participate in the Walk however please accept this donation on my behalf. \$ _____

WAIVER: I know that walking a Walk-A-Thon is a potentially hazardous activity. I should not enter and walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the course. I assume all risks associated with walking in this event, including, but not limited to: falls, contact with other participants, the effects of the weather, including low temperatures and/or wind chill, traffic and conditions of the road. All such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of this entry, I hereby for myself, heirs, executors and administrators waive any and all claims I may have for damages against SOS Walk, all sponsors and individuals associated with the event, their representatives and successors, and assignees for any and all injuries suffered by me in connection with this event, including pre-and post-race activities. I hereby grant permission to SOS Walk, as well as its authorized agents to use my name and photographs, videotapes, motion pictures, recording or any other record of my participation in this event for any purpose. There will be a \$35 fee for all returned checks. **Sorry no refunds.**

Participant Signature If under 18 (Parent/Guardian Signature) Date / /

