

North East Outreach & Support Services

Walk a Mile in Her Shoes®



Thursday May 5th at 5pm in the Northern Lights Palace

Registration Form

Registration Deadline: May 2, 2016

Full Name: _____

Age: _____ City/ Prov: _____

Address: _____

Shoe Size: _____ How did you hear about the event? _____

Contact Phone #: _____ Email: _____

Registration Fee - \$25.00 individual or \$20.00/team member (cheque made payable to NEOSS):

Cash: \$ _____ Cheque: \$ _____

Each participant will receive pledge sheets to gather donations. These will be collected at the event on May 5, 2016.
There are no minimum and no maximum pledge requirements.

T-Shirt Size (Available with minimum \$50.00 pledge only): **S M L XL XXL**

Continue only if you are registering as part of a team (Team members must attach individual registration forms to be eligible for discounted team entry).

Team Name: _____

Of Team Members (minimum of 4, maximum of 8)

Names and relation to team members (ex. Coworkers, family, friends):

Are you challenging another team or have you been challenged by another team?

If so, post the challenge on our Facebook page at North East Outreach and Support Services to make the challenge public.

There will be no refund of entry fee for inability to participate. Please notify NEOSS in any case of participant substitution. Pledge forms will be emailed to the email address you have provided, or can be picked up from the North East Outreach and Support Services office at 103 McKendry Ave E, Melfort, SK. Pledge forms are not available for download online.



**WALK A MILE IN HER SHOES: THE INTERNATIONAL MEN'S MARCH
TO STOP RAPE, SEXUAL ASSAULT, AND GENDER VIOLENCE**

North East Outreach & Support Services

Walk a Mile in Her Shoes®



In consideration of my entry in the Walk A Mile In Her Shoes®: The International Men's March to Stop Rape, Sexual Assault and Gender Violence, I, for myself, my heirs, my executors and administrators, waive and release any and all rights and cares for damages I have or may hereafter have against the organizers of this event, its principles, its employees, all sponsors, and their representatives and all claims of damages, demands, actions, whatsoever in a manner as a result of my participation in the Walk a Mile in Her Shoes® event, including travel to and from the event. I attest and verify that I am physically fit and have sufficiently trained for completion of this event and I have not been advised otherwise by a qualified medical person. Further, I hereby grant full permission to any and all of the foregoing, to use my name and likeness in any broadcast, telecast, video or print media of the event without compensation.

In the case of any injury during the event, including travel to and from the event, Walk A Mile in Her Shoes®, North East Outreach and Support Services, event volunteers, or those involved in any way in the event will not be held responsible or be held liable for costs associated with any injury.

Print Name: _____ Date: _____

Signature: _____

I agree to return 100% of all pledges collected as well as any monies raised through third party fundraising events on behalf of North East Outreach and Support Services.

Signature: _____ Date: _____

Team Name: _____

**If you require more information please feel free to contact
North East Outreach and Support Services at 306-752-9464.**

**Please send completed registrations to:
North East Outreach and Support Services**

**Box 2066
Melfort, SK
S0E 1A0**

OR

adm@northeastoutreach.ca



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