

The Child Advocacy Center is excited to host the 10th annual *Hometown Heroes Walk for Children* to celebrate Child Abuse Prevention Month!

The *Hometown Heroes Walk for Children* will be held on Friday, April 25, 2025 at the Murfreesboro Civic Plaza. Registration will begin at 10:45 a.m., followed by the opening ceremony at 11:30 a.m., and the walk will start at 12:00 noon. Complimentary shuttles will run from Oaklands Park to the event kick-off from 10:30-11:30 a.m. This FREE event will conclude with a picnic lunch at the Oaklands Park pavilion. The park is located at 427 Roberts Street, Murfreesboro, TN 37130.

We need your help to make the *Hometown Heroes Walk for Children* a huge success. The attached sponsorship guide details five different levels of sponsorship with information on complimentary walkers and t-shirts. After reviewing the guide, please complete the sponsor commitment form. Be sure to complete the walker registration forms for each individual walker and list their t-shirts sizes for the complimentary sponsor t-shirts.

Please mail your commitment form and contribution by **Monday, April 7, 2025** for your name, business name, or logo to be included on the event t-shirts. The form can also be faxed to (615) 867-9000 or emailed to <u>kcolwell@cacrutherford.org</u>. The Child Advocacy Center is a 501c3 non-profit agency, and your contribution is tax deductible.

On behalf of the children and families we serve, thank you for your consideration of our request. When you partner with the Child Advocacy Center, you are supporting child abuse intervention and prevention services for vulnerable children in our community. In the last 24 years, 49,427 children and adults have been served.

For more information on the *Hometown Heroes Walk for Children* please contact Karista Colwell at (615) 867-9000 or <u>kcolwell@cacrutherford.org</u>.

Warmest Regards,

Child Advocacy Center Board of Directors

Dr. Trey Duke, Lt. David Durham, Chase Fann, Katrina Farrer, Tammy Greer, Emily Hutchinson, District Attorney General Jennings Jones, Deirdre C. Lackey, Tara MacDougall, Retired Judge Susan Melton, Christina Moody, Sheri Morgan, Betsy Murfree, Catherine Post, Deputy Chief Britt Reed, Tracy Sheppard, Wendy LaLance White, and Retired District Attorney General William C. Whitesell, Jr.

Child Advocacy Center Staff

Elizabeth Benton, Mirian Izzel Castro, Karista Colwell, Jennifer Darnell, Sharon De Boer, Abigail Greene, Amanda Hammond, Presley Hosford, Evelyn Guillen Martinez, Aeryn McMurtry, Amanda Pruitt, Jessica Wauchek, and Julie Williams



SPONSORSHIP GUIDE April 25, 2025

Platinum Sponsor (\$10,000)

- Event presenting sponsor announced at the event
- Business logo listed at the top of the t-shirts
- Recognition as the presenting sponsor in all event publicity
- Business booth, banner, and/or sign that you provide at the event
- 4 Yard signs at the event with business logo
- Social media recognition
- 10 Complimentary event t-shirts and walk registrations

Gold Sponsor (\$5,000)

- Sponsorship announced at the event
- Business logo listed on the t-shirts
- Recognition as a sponsor in event publicity
- Business booth, banner, and/or sign that you provide at the event
- 2 Yard signs at the event with business logo
- Social media recognition
- 8 Complimentary event t-shirts and walk registrations

Silver Sponsor (\$2,500)

- Sponsorship announced at the event
- Business name listed on the t-shirts
- Recognition in some event publicity
- Business booth, banner, and/or sign that you provide at the event
- 1 Yard sign at the event with business logo
- Social media recognition
- 6 Complimentary event t-shirts and walk registrations

Bronze Sponsor (\$1,000)

- Business name listed on the t-shirts
- Business booth, banner, and/or sign that you provide at the event
- Social media recognition
- 4 Complimentary event t-shirts and walk registrations

Friends of the CAC (\$500)

- 1 Yard sign along the walk route with the business logo
- 2 Complimentary event t-shirts and walk registrations



YES, I WANT TO SUPPORT CHILD ABUSE VICTIMS!
Platinum Event Presenting Sponsor (\$10,000)
Gold Sponsor (\$5,000)
Silver Sponsor (\$2,500)
Bronze Sponsor (\$1,000)
Friends of the CAC (\$500)
Other (Please specify the amount) \$
Name as it should appear in media materials:
Contact Person Title: Mr. Ms. Mrs. Dr. (Please circle)
Contact Person:
Company Name:
Mailing Address:
City/State/Zip:
Telephone:

____ As a sponsor, I understand we need to complete one walker registration form with t-shirt sizes for each of the sponsor's walkers to receive complimentary t-shirts. T-shirts will only be ordered for walkers that pre-register by April 7, 2025

__ As a sponsor, I <u>DO NOT</u> want the complimentary t-shirts that come with my sponsorship.

Email: ___

Please mail or email this form and walker registrations to the Child Advocacy Center Mail: 503 Highland Terrace, Suite C., Murfreesboro, TN 37130 Email: <u>kcolwell@cacrutherford.org</u>



The Child Advocacy Center will celebrate Child Abuse Prevention Month with the *Hometown Heroes Walk for Children* on Friday, April 25, 2025 in Murfreesboro. Check in at the registration table from 10:45-11:30 a.m. The opening ceremony is at 11:30 a.m. and the Walk will begin at 12:00 p.m. The event will conclude with a picnic lunch at Oaklands Park, located at 427 Roberts Street, Murfreesboro, TN 37130. Each participant must complete and sign this form and include their t-shirt size.

Please complete one registration form per person, including children.

PARKING: Complimentary shuttles to event will leave Oaklands Park between 10:30 and 11:30 a.m. No transportation will be provided after 11:30 a.m.			
PLEASE PRINT:	•		
Title: Mr. Ms. Mrs. Dr. (Please circle)			
First Name	Last Nam	e	
Address	Apt. #		
City	State	Zip Code	
nail Address Telephone			
I am going to Walk. I understand it is FREE to	participate. Bel	ow is my signed waiver	
I am a complimentary walker with the followi	ing team:		
Hometown Heroes Walk T-shirt			
T-shirts will only be ordered for sponsors and walkers that pre-register by April 7, 2025			
(Circle one size) Adult T-shirt sizes only: (S, M, L, XL, 2X, 3X, 4X)			
I want to support the Walk, enclosed is my co Other (Please specify the amount) \$		\$500 \$1,000 \$2,500\$5,000\$10,000	
Waiver – <u>MUST BE SIGNED TO PARTICIPATE IN THE</u>	HOMETOWN HE	ROES WALK FOR CHILDREN	

I know that participating in the Hometown Heroes Walk is a potentially hazardous activity. I should not enter and participate unless I am medically able, properly attired, and otherwise prepared. I assume all risks associated with participating in the Hometown Heroes Walk, including, but not limited to falls, contact with other participants, contact with participants who may have COVID-19, effects of the weather, including high heat and/or humidity, traffic and conditions of the road, with all such risks being known and appreciated by me. I understand that event officials may terminate my participation in the Walk at any time, for any reason, and I agree to abide by all decisions of event officials. Having read this waiver and knowing these facts and in consideration of your accepting my entry form, I, for myself and anyone entitled to act in my behalf, waive and release any and all persons and entities connected with the Hometown Heroes Walk, including event officials, staff, volunteers, and all sponsors, their representatives and successors, from all claims of liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this Waiver. I grant permission to all of the foregoing to use any photographs, videos, recordings, or any other record of this event for any legitimate purpose. I hereby certify that I am at least 18 years of age or that I am under 18 and my parent or legal guardian has signed this form.

Signature ___

Date ___

Date

If a participant is under age 18, this is to certify that my child has my permission to participate in the Hometown Heroes Walk and is in good physical condition, that I have read and I consent to the terms of the above waiver, and that walk officials have my permission to authorize emergency treatment if necessary.

Signature of parent or legal guardian:

(If participant is under 18 years of age)

Please make checks payable to: Child Advocacy Center Please mail or email the walker registrations to the Child Advocacy Center Mail: 503 Highland Terrace, Suite C, Murfreesboro, TN 37130 Email: <u>kcolwell@cacrutherford.org</u> Questions: Karista Colwell (615) 867-9000