# 2022 Walk for Dyslexia-Madison Mail-In Registration Form

### Walk In-Person or Virtual in 2022

Currently, we will be hosting a limited in-person event at Brittingham Park, Madison, WI. If necessary, we will transition to a fully virtual event and notify all registrants. When you register, your non-refundable registration fee applies to either scenario. We will follow the recommendation of local public health officials in determining how we hold our event during this COVID-19 emergency as it continues into 2022.

Regardless of what form of engagement you choose, your support is critical to our ability to provide our life-changing one-on-one tutoring services. Our Walk has been a fun day for families and Center supporters to get together for over ten years. Yet we believe the main reason people register is to support the Center and to support the children that we serve. Thank you for continuing this tradition.

Note: All participants will receive an official Walk T-shirt while supplies last. Pre-registering by May 1st guarantees you will receive a shirt.

Check or cash with this form, please.

Walk Registration/Check-In will take place at the Brittingham Park Shelter May 21 at 7:30 am. Walk starts at 8:30 am. Advance Registration Fee for Adults: \$25.00

Payment must be received along with the entry form before May 1<sup>st</sup> to guarantee your shirt size.

## Event Day, On-Site Registration Fee for Adults: \$30.00

#### Team Advance Registration Fee for Adults: \$20.00 per person.

A team must consist of five or more adults and children. Group registrations must be received in the same envelope and must be received by May 1<sup>st</sup>.

#### Children 12 and under: \$10.

Complete and Sign your Registration Form; send it with your payment to Gail Piper, 1909 E Dayton St, Madison WI 53704 Checks are to be made payable to: <i>Madison Area Children's Dyslexia Center</i> For more information see our website: www.walkfordyslexiamadison.org					
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I am registering a Team. Enclosed are group re	gistration fees of	f \$20 for ad	ults (\$10 for $_{-}$	children under 12).	
Team Name:					
I cannot attend, but enclosed is my donation of	\$				
_ I would like to volunteer the day of the Walk. P	lease contact me	at the phone/ema	il below.		
Participants will receive a commemorative T-shirt. Youth Medium	Please indicate Youth Large	size(s): Adult Small		_ Medium	
Large	_1X _	2X	3X	No T-shirt(s)	
Name Please Print			_		
Address			-		
City/State/Zip			_		
Home Phone Wo	Work/Cell Phone		Email		
Emergency Contact and Phone Number			_		
Please enter me in the "Walk for Dyslexia-Madis Madison Area Children's Dyslexia Center from a arise out of, or be incident to my participation in any photogra	on". I, on behalf iny and all claims the Walk event. I	, damages, and right	rs, executors, ghts of action permission for	I may have, present or future or the use of my name and/or	that may
NOTE: If participar	nt is under 18 yea	articipants must s ars of age, parent o for your registrati	or guardian m	nust sign. htered	

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