

Walking with Moms in Need



Peace Valley Park, Pavilion 1 (Angler's Pier)
230 Creek Road
Doylestown, Pa
Saturday, November 7, 2020

Entries

Who: Walkers of all ages. Gather your family, friends and co-workers. Walkers are also invited to participate using the same course. The course is stroller and wheelchair accessible.

What: The BCPLC Walking with Moms in Need fund raiser for the Bucks County Area Pregnancy Care Centers.

When: Saturday, November 7, 2020
10:00 am Registration begins
11:00 am Walk Starts
12:00 pm Boxed Lunches Distributed
12:30 pm Door Prizes/Speakers

Adults - \$20
Wheelchairs - \$10
Children 12 & under - \$10
Family of four (4) or more - \$40
Strollers - free

T-shirts guaranteed if registered by October 15th
T-shirts as available after this date
Boxed Lunches* Bottled Water

*Boxed lunches provided by MEI Catering, Feasterville, Pa.
You are encouraged to bring a blanket with you

COVID-19 Restrictions Apply

Mask should be worn, and social distancing practiced

To make an on-line donation to help Moms in need use the link below
<https://gf.me/u/ykns9>

Make checks payable to BCPLC and mail to:
PO Box 431 Richlandtown, Pa 18955-9998

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip Code _____

Shirt Size (circle 1) YS YM YL S M L XL XXL email _____

Box Lunch Sandwich (check) _____ Ham _____ Ham & Cheese _____ Turkey _____ Turkey & Cheese

Waiver/Release: I acknowledge that this activity may involve a test of a person's physical and mental limits and may carry with it a potential for death, serious injury and property loss. The risk may include but are not limited to those caused by facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic, and action of others including but not limited to participants, volunteers, spectators, coaches, event officials and event monitors and/or producers of this event. I acknowledge that BCPLC and their directors, officers, volunteers, representatives and agents are not responsible for errors, omissions, acts or failure to act of any party or entity conducting a specific event or activity on behalf of BCPLC.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS 'WAIVER AND RELEASE' AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITIES AND I AGREE TO VOLUNTEERLY GIVE UP OR WAIVER ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST BCPLC FOR PERSONAL INJURY OR PROPERTY DAMAGE.

Signature _____ Date ____/____/____ Registration: \$ _____

(signature of parent if under 18)

Donation/Pledge \$ _____

Total \$ _____