

REGISTRATION FORM

(A separate form is required for each participant)

Yes! I'll walk with NAMI for the Mind of America!

Name:

Address:

City, State, Zip:

Phone:

Email:

NAMI Affiliate:

Team Name:

Team Captain:

Team Captains: To ensure accurate credit to your team's total, we encourage you to fill in the Team Name and Team Captain lines on all Registration forms and Walker Donor forms before you distribute them to your walkers. Thank you.

Individual Walker Team Captain

Walker on a Team

Walk day Volunteer. Please call me.

I cannot attend the Walk. I have enclosed my donation in the amount of \$ _____ to support NAMI.

Please send _____ extra brochures

I am a...

Consumer

Family Member

Professional

Friend/Supporter

Adult

Child (Under 18)

Yes, I will be staying for the picnic and awards program after the walk. I am pre-registering (as required) for lunch.

Each Participant must sign below.

Signature:

Parent or Guardian - must sign for walker under age 18