



Serving Chatham County
for 25+ Years

WALKER REGISTRATION FORM

Chatham Hunger Walk

**First Sunday in November - Pittsboro Elementary School
Walk Registration 1:30 - Walk Begins 2:30**

Walker Registration

Name _____ Age _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Email _____
 Name of Participating church, school or community group _____

It is best to collect all money when you sign-up sponsors. Checks should be made payable to "CORA Food Pantry." Return this envelope with completed donation form to your Team Captain.

Sponsor's Name	Address*City*State	Zip	Donation	Paid
(example) John Doe	101 Chatham Road, Siler City, NC	27344	\$25	
1.				
2.				
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15.				
16.				
CORA Food Pantry is a 501c3 Nonprofit Charity. All donations are tax deductible to the full extent of the law.		TOTAL		

Statement of Consent

I understand the risks involved in participating in the Chatham Hunger Walk and willingly and voluntarily accept these risks. I attest that I am physically fit and prepared for this event. I grant permission for organizers to use photographs and quotations from me in accounts and promotions of this event, in publicity materials for CORA Food Pantry and its affiliated organizations.

Signature: _____

Signature of parent or guardian if walker is under 18 years of age: _____

All Chatham Hunger Walk Forms must be returned to your Team Captain.

Team Captain Name: _____

Team Captain Phone: _____

Team Captain Email: _____