

Name:\_

## Dream Walk

## August 14, 2022

## **Festival Park-Hobart, IN**

Names (I	/lultiple names):
Address:	
City, Stat	e, Zip:
Contact e	mail:
Phone nu	ımber:
	enclosed:
Number	
	\$10/person for Dream Walk includes lunch
	\$20/person for Dream walk includes party pack and lunch
	Free Dream Walk participant with disability includes a personalized cape
	Walk Team Name:
	Team Honoree Name:
<b>Event So</b>	hedule:
8:30am P	ark opens Tailgate tent set up
10:00am	Registration Opens
10:30am	Walk Starts
12:00pm	Kids Dash Starts
12:00pm	Festivities begin! Food, dancing, characters, fire trucks, therapy dogs, resource fair
and much	n more!
	alk team leaders:
-	hoto of the person the team is honoring and a paragraph including their name, age,
=	shments, and favorites to events@chasingdreams.org
	noree raises over \$75.00 in donations will receive a \$20.00 Target gift card.
•	August 7)  registration must be post marked by August 7, 2022
	gistration available at: http://chasingdreams.org/dream-walk-2022
	nd release of liability: By signing this form, I assume all risk and responsibility
	d with walking and participating in this event. I agree to waive any responsibility for
	oss for Chasing Dreams Inc, sponsors, volunteers, board members, employees, or
	entity associated with this event. I grant permission to the above to use my image
=	graphs, video, or any other record of this event for any legitimate event purpose.
<del>-</del>	: Date:
Print Nan	ne:
Darent or	Guardian: