

## Individual Sponsors

Be sure to complete both sides of this form and bring it with all your pre-paid donations to registration on the day of the event. Make additional copies if needed. *Please make checks payable to 5Kevents.org.* Proceeds benefit charities related to the event selected.

Walk/ Run Sponsor Name	Donation	Collected	
		Check	Cash
ex. John Smith 1234 Main Street Milwaukee WI 53207	\$35.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

## Participant

Complete both sides of this form and bring it with your pre-paid donations on the day of the event.

**Make all checks payable to 5Kevents.org**

Proceeds benefit the unique charity associated with the event you are participating in.

Event \_\_\_\_\_  
 Event Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Day Phone \_\_\_\_\_  
 Evening Phone \_\_\_\_\_  
 eMail \_\_\_\_\_

**Prizes will be awarded for the top three individual fund-raisers at the conclusion of the event.**

**Thank you for making a difference!**

### WAIVER

I agree to indemnify and hold harmless 5Kevents.org and it's associated charities from all costs, expense and liability arising out of my (or my child's) participation in this event. I do hereby waive all claims for damage or loss to me or my child's person or property which may be caused by any act, or failure to act, 5Kevents.org, its officers, agents or employees arising directly or indirectly from my or my child's participation in this event; and I hereby assume liability for any loss, damage or other liability for such an event.

\_\_\_\_\_  
 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Signature (If under 18, parent or guardian must sign)

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**SPONSORSHIP  
AND ADVERTISING  
OPPORTUNITIES**