



# Walk FOR Life

**GOES  
VIRTUAL**

*The Care Center*

**WHAT:** WALK FOR LIFE

**WHERE:** PARTICIPANT'S CHOICE

**WHEN:** ANYTIME THE WEEK OF SEPT. 14<sup>TH</sup> – 19<sup>TH</sup>

FOR MORE INFORMATION ON HOW YOU CAN BECOME A SPONSORED WALKER, VISIT OR CALL: [THECARECENTERTN.ORG](http://THECARECENTERTN.ORG) • 423-775-0019

# Sponsor Form

MY GOAL \_\_\_\_\_ TOTAL \_\_\_\_\_

Bring by or mail the completed form to the Center by Sept 19<sup>th</sup>. You may photocopy this form for additional pledge space or download a PDF from our website.

Walker's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
ST, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Church/Group \_\_\_\_\_  
Email \_\_\_\_\_

No need to collect money. We handle the billing for anyone that is unable to pay at the time of their pledge! (\$10 minimum for us to bill, please)

**QUESTIONS? 423-775-0019**

**THE CARE CENTER**

285 Main Street • Dayton, TN 37321 • thecarecenter.tn.org

Please print all information clearly. Make checks payable to The Care Center.

**PAID** **BILL ME**

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| First   | Last |     |  |
| Address |      |     |  |
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\$25  \$35  \$50  \$100  Other \$ \_\_\_\_\_

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## Pre-Register online today!

Or fill out this form and mail it in!  
Let us know you're coming!

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

ST/Zip

\_\_\_\_\_

Phone

\_\_\_\_\_

Church/Group

\_\_\_\_\_

Email Address

I am:  Adult  Teen  Child

Have you walked in a Walk For Life before?

Yes  No

Shirt Size needed (circle one):

Child: **M** **L**

Adult: **S** **M** **L** **XL** **XXL**

I am unable to walk, but will make a donation of \$ \_\_\_\_\_ (Please make checks payable to The Care Center.)

Please send me \_\_\_\_\_ additional brochures to distribute at work, church or school.

By submitting this form, I waive all claims for myself and my heirs against The Care Center for any injury or illness which may result directly or indirectly from my participation. I also give this organization permission to use photographs or videos of me that I have submitted as proof of my participation for any future event promotion. \*

\_\_\_\_\_

Signature (Parent if minor)

Return this form to:

**The Care Center**  
285 Main Street  
Dayton, TN 37321  
423-775-0019

thecarecentertn.org

Or pre-register by phone, email, or online.

Walk  
FOR  
Life  
GOES  
VIRTUAL

## WE'VE GONE VIRTUAL!

Walk anywhere you choose between Sept. 14<sup>th</sup> – 19<sup>th</sup>  
Send us a picture or video using #tccwalkforlife2020 telling us why you walk!

### IT'S EASY!

- Collect no money!
- Only a two mile walk anywhere you choose.
- Walk September 14<sup>th</sup> – 19<sup>th</sup>.
- Free T-shirt for \$200 in pledges!
- Send us a picture or video while you walk!

**STEP 1:** Register online, by mail or by phone.

**STEP 2:** Ask EVERYONE you know to sponsor you. You will be amazed by how many will say YES!

**STEP 3:** Please be sure all names and addresses are complete and easy to read. Bring your completed Pledge Form(s) by The Care Center or mail it in by Sept 19<sup>th</sup>. Don't collect any money. We'll handle the billing.

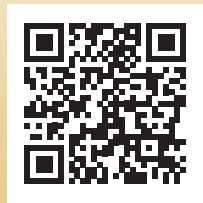
### YOUR SUPPORT HELPS

Your support helps provide accurate information and compassionate assistance to over 5,000 men, women and students every year. We offer comprehensive, positive alternatives to abortion.

### OUR SERVICES

Our free and confidential services include:

- Pregnancy testing and limited ultrasounds
- On-going pregnancy support
- Material assistance
- Parenting classes
- Christ-centered peer counseling
- The EDGE program to schools, churches, and other organizations
- 24 hour help-line through Option Line
- Post-abortion restoration counseling



### QUESTIONS?

423-775-0019  
or [thecarecentertn.org](http://thecarecentertn.org)  
#tccwalkforlife2020