



Team/Individual Registration & Waiver

Name of Team/Individual: _____

Name of Team Captain (if applicable): _____

Address: _____ City: _____

Province: _____ Post Code: _____ Phone #: _____

Email: _____ Website: _____

Location of Walk (if not at Ralph's): _____

Total Amount Remitted by Team/Individual: \$ _____

Team Captains/Individuals are responsible for collecting money and remitting it with the completed sponsorship form to Ralph's Retreat at 67 Queen Street, St. Williams, 10:30am on Sunday October 27th 2019. All participants must read and sign the waiver below.

Information for Team Members

1. Pledges are flat rate amounts, not based on number of Kms walked. We encourage pledges in \$5 increments (the cost of a bale of hay or straw).
2. We will be walking approx. 3kms from the School in St. Williams to Ralph's Retreat and back.
3. Please remit all pledge forms and money at the start of the walk.



Thanksgiving Lunch Registration

A plant-based thanksgiving lunch will be served at the school after the walk is complete. Those who cannot walk are welcome to help set up the school and prepare the lunch. Turk-Eh and gravy from Main Deli will be provided by Ralphy's and we ask that anyone joining us brings a side-dish or dessert.

Are you coming? YES/NO How many people? _____

If yes, what will you be bringing?

___ Mashed potatoes

___ Vegetable dish – please specify _____

___ stuffing/dressing

___ Dessert – please specify _____

___ Salad

___ Buns

Other: _____

We will let everyone know the number of participants closer to the day so you know how much to bring!

PLEASE REMEMBER ALL FOOD AND BEVERAGES MUST BE PLANT-BASED

2019 TEAM MEMBERS PAGE

Please direct any questions to ralphysretreat@gmail.com or call 519-420-1364.

In agreeing to walk, and in signing this release, I acknowledge and understand its intent, and I agree to hold harmless Ralphy's Retreat Animal Sanctuary, corporate sponsors, cooperating organizations and any other parties connected with this event in any way, singly or collectively, from and against any liability for an injury, misadventure, harm, loss, or damage suffered or sustained as a result of participation in Welly Walk 2019 or any associated activities. I consent to and permit emergency treatment to be administered to me in the event of injury or illness at the event. I also give my permission to Ralphy's Retreat Animal Sanctuary to use my name and/or image in connection with this event.

Participants' signatures below indicate that they have read and agree to this waiver:

Team Member	Phone number	Email Address	Signature	\$ Raised

Thank you for supporting Ralphy's Retreat Welly Walk 2019