



Walk to Remember — Saturday, May 5, 2018

Join us in remembering your loved ones by participating in our 4.5-mile Annual Walk to Remember around Rice Lake in Maple Grove. Photo remembrance signs will be displayed along the path; reading of your loved one's names; kid's craft activities. Preregistered participants will receive a T-shirt and a boxed lunch. The walk begins at the Angel of Hope located at the Maple Grove Arboretum — 9400 Fernbrook Lane.

Registration and Check in: 9:00 a.m.
Remembrance Gathering: 10:00 a.m.
Walk Begins 10:30 a.m. Event ends at 2:00 p.m.
Lunch will be served from 11:00 a.m. – 1:00 p.m.

For online registration and/or to order a personalized remembrance sign visit www.friendsoftheangel.org
Deadline for preregistration: **Saturday, April 14, 2018.**

Same day registrants will not be guaranteed a T-shirt and/or lunch.

Walk is limited to 350 participants, so early registration is encouraged. Please leave pets at home.

Questions: email to info@friendsoftheangel.org

Family Registration Form

Name _____	Name #2 _____	Advanced Registration Fee: (Deadline April 14) Adult--\$25 Child--\$10 (11 yrs. & under)
Address _____	Shirt size: _____	
City _____	Lunch Preference _____	Same Day Registration Fee: Adult--\$30 Child--\$15 (11 yrs. & under)
State _____ Zip _____	Name #3 _____	
Phone _____	Shirt size _____	Make checks payable to: Friends of the Angel
Email _____	Lunch Preference _____	
Shirt Size Preference:	Name #4 _____	Mail this form and check to: Friends of the Angel—WTR 2018 P.O. Box 485 Maple Grove, MN 55369
Adult: S M L 2XL 3XL	Shirt Size: _____	
Youth: S M L	Lunch Preference _____	We are including payment for _____ personalized remembrance sign(s).
Boxed Lunch Preference: Regular Veggie kid's		

In consideration of the entry being accepted, we hereby, for myself, heirs, executors and administrators release and discharge the City of Maple Grove, Maple Grove Hospital, Friends of the Angel and any other official sponsors from any liability in case of any injury or worse received as a result of my participation in the Walk to Remember or as a result of traveling to or from the walk. We further state that we are in proper physical condition to participate in this walk.

Signature _____ Date _____

_____ We give permission to the Friends of the Angel to use our pictures on their website.

Please read my loved one's name _____

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