

# *Walk for Life*

**Sunday, October 19, 2008**

**Shamel Park, 3650 Arlington Avenue**

**Registration: 1:00 PM**

**Walk: 1:30 PM**

To benefit the ministry of:

***Riverside Life Services***

3727 McCrav Street • Riverside, CA 92506 • 951-784-2422 • [riversidelifeservices.org](http://riversidelifeservices.org)



**Come on out to the park for an afternoon of food, fun and exercise as we  
WALK FOR LIFE**

**Day will include:**

**Food to purchase**

**Hamburgers & Fries**

**Funnel Cakes & Smoothies**

**Proceeds benefit: *Riverside Life Services***

***Christian DJ***

***Raffle Prizes***

# Walk for Life 2008 Sponsor Pledge Form

Walker's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_  
 Church: \_\_\_\_\_ I am an/a:  Adult  Teen  Child  
 How did you hear about Riverside Life Services' Walk for Life? \_\_\_\_\_

**My Goal Is:**

\$200  
 \$300  
 \$500  
 \$1,000  
 Other \$ \_\_\_\_\_

**Please PRINT All information and indicate total amount pledged**  
**Please make checks payable to: *Riverside Life Services***

Name: _____ Address: _____ City: _____ State: ____ Zip: _____ <input type="checkbox"/> \$20 <input type="checkbox"/> \$30 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____ Please add me to mailing list <input type="checkbox"/> <input type="checkbox"/> <b>BILL ME</b> OR <b>PAID</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	Name: _____ Address: _____ City: _____ State: ____ Zip: _____ <input type="checkbox"/> \$20 <input type="checkbox"/> \$30 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____ Please add me to mailing list <input type="checkbox"/> <input type="checkbox"/> <b>BILL ME</b> OR <b>PAID</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____
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## WALKER INFORMATION

**PRE-REGISTER.** Please fill out and mail the pre-registration form below.

**Fill out the sponsor form completely and legibly.**

- There is no limit to how much you can raise, start by sponsoring yourself, and ask family, friends and co-workers.
- Make sure YOUR name, address, phone number, etc. is in the space provided.
- Double-check your SPONSORS' entries to be sure all information is provided – make sure we have zip codes.

**Bring your completed forms and collected donations with you on the day of the WALK.**

- Please COLLECT as much of the money as you can prior to the WALK.
- We will gladly invoice pledges over \$25.00
- Indicate BOTH amount pledged and amount paid for each sponsor
- Be sure to MARK whether paid by "Cash or "Check" (along with check #, please).
- Let your sponsors know all donations are TAX-DEDUCTIBLE.
- If it rains you can bring your umbrella and walk or just bring your sponsor pledge form to the WALK and walk on your own later.
- If you cannot make it to the WALK, you can either bring your sponsor form to the center or mail it to 3727 McCray Street and walk on your own later

For more sponsor forms, please call us at 951-784-2422 or go on-line to print forms: [www.riversidelifeservices.org](http://www.riversidelifeservices.org)

***BIG Steps... Little feet!***



***Will You Walk For Me On October 19<sup>th</sup>?***

Walker Pre-Registration – **PLEASE PRINT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

How did you hear about Riverside Life Services' Walk for Life? \_\_\_\_\_

Check here if under 18 years old

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**RELEASE OF LIABILITY:** I hereby agree on behalf of myself, dependent(s), and legal representatives that I accept and assume any and all risks resulting from attendance and participation in the WALK FOR LIFE and hereby release Riverside Life Services and all other organizations participating, from any claim, liability or cause or action on account of injury which may occur or arise out of participation by me or my family members in the WALK FOR LIFE, on Saturday, October 27, 2007.

\_\_\_\_\_  
Signature of participant - (or legal guardian if under 18 years of age)

\_\_\_\_\_  
Date

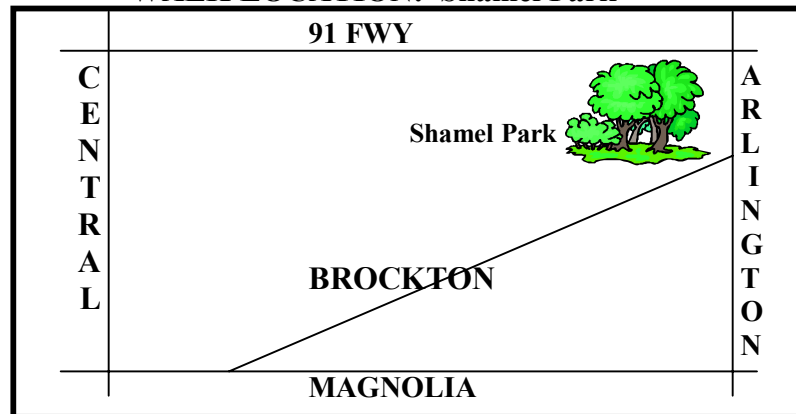
# ***YOUR SUPPORT WILL HELP RIVERSIDE LIFE SERVICES***

Riverside Life Services is a non-profit Christ-centered ministry serving Riverside County for over thirty years. Our mission continues to be "to provide a safe, confidential, loving and caring haven in which women and families can experience hope in a pregnancy crisis situation". Last year, we assisted literally hundreds of individuals with life-affirming assistance, such as:

- ♥ Free pregnancy tests
- ♥ Alternatives to abortion counsel and support
- ♥ Adoption counsel and referrals
- ♥ Community Outreach Education on Abstinence & Sexual Purity
- ♥ Parenting Classes: Where Moms benefit from education and receive diapers, formula, food, infant clothing and other infant and toddler items in return.

Your donations help to enable women with crisis pregnancies to give life to their babies. YOU are helping to make a life saving, life changing difference, in Jesus name.

## **WALK LOCATION: Shamel Park**



**Riverside Life Services**  
**"Walk for Life"**  
**3727 McCray Street**  
**Riverside, CA 92506**  
**951-784-2422**



*Now choose life, so that you and your children may live  
Deuteronomy 30:19 (NIV)*