



Join us as we hike to raise essential funds in support of Hospice residents and their families in Chatham-Kent. Sign-up, collect pledges, and hike Mud Creek Trail anytime between April 29, and May 4, or in-person on May 5, 2024. Hike starts at 2:00 with pre-hike activities and check-in starting at noon.



APRIL 29 - MAY 5, 2024



MUD CREEK TRAIL

Registration Form (Or skip the paper and register online at www.hikeforhospice.com)

Hiker's Name: _____ Phone: _____

Address: _____

City: _____ Postal Code: _____

E-mail: _____

Team Name: _____

Hike Gear

☐ **T-Shirt – \$20** T-Shirts will only be available for pre-order. Order Deadline: April 2, 2024

Youth: ☐ Small ☐ Medium ☐ Large

Adult: ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XXL ☐ XXXL

☐ **Memorial Sign – \$15**

These memorial signs will be displayed along Mud Creek Trail for the week of April 22 to May 5, 2024. After the event the signs will be available for the purchaser to pick up and take home. Included on the sign will be your loved ones name, picture and a message (maximum 30 words). Please send the information to foundation@chathamkenthospice.com. The deadline to guarantee a memorial sign is April 1, 2024.

☐ **Tie-Dye Wayfarer Style Sunglasses – \$5**

Purchase custom, limited edition tie-dye sunglasses to complete your Hike look and show your support year-round!

HIKE WAIVER (Must be completed before hiking)

I, _____ the undersigned participant in the Hike for Hospice 2024, in consideration of myself and/or my minor child, hereby - for myself, my heirs, executors and administrators - assume any and all risks which might be associated with the event. I further waive, release, discharge and covenant not to sue Chatham-Kent Hospice or Chatham-Kent Hospice Foundation, its officers, board of directors, employees, sponsors, organizers, volunteers, or other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered by myself and/or my minor child as a result of taking part in the event and any related activities. I also authorize the use of any photo, film or video taken of me and/or my child at the event for marketing purposes. By signing this waiver, I acknowledge having read, understood and agreed to the above waiver.

Signature: _____ Date: _____

Powered by

