Shoot for a Cure04/13/1911am - 4pmSt John's Lutheran Church3220 Columbus St, Grove City 43123						3123	WHAT DO I NEED TO DO?			
Name of Shooter:					Shots Made	Counter's Initials:				Fill out your Shooter Registration Form to become a shooter. Then –tell everyone you know to raise money and awareness.
SPONSORSHIP FORM	Pl	lease fill out a	d bring this	form to the	e event. Make	checks payabl	e to HDSA.			
Shooting in Memory or Honor of Donors Names & Addresses					Pledge		# of	Pledge	1. Raise Money? From now until Hoop-A-Thon, ask relatives, friends, neighbors	
			-		Flat	Per	Shots	Total \$	and co-workers to sponsor you as a shooter by making a	
				Phone #	Donation	Basket	Made		contribution per basket or a flat donation to the HDSA. Fill out the shooter sponsor list with the sponsor's name, address, and	
	303					Donation	Dusket	Widde	Donated	donation amounts.
										2. Shoot!
										Hoop Day: Bring this form and any donations you have collected. Shoot free throws for five minutes, tally up your total shots and
										report to the scorer.
										3. Collect Money!
										Collect your remaining pledges and send to our chapter office:
										Central Ohio Chapter, P.O. Box 2213, Columbus, OH 43216
										4. Feel Proud!
										Experience the pride and satisfaction of knowing you are helping to find a cure to HD!
										SPONSORSHIP OPPORTUNIES
										Gold Sponsor - \$750
										Name and logo on signage at the entrance of the location. Recognition in all publicity and promotional materials, including:
										-Posters.
										-Name and logo beside the registration table.
										-Name and logo in quarterly newsletter.
										Silver Sponsor -\$500
										Recognition in publicity and promotional materials, including:
										-Posters. -Name and logo beside registration table.
										Bronze Sponsor - \$300
Age Bracket:	12 & Under	1	3 to 18	19 to 35		Over 50	TOTAL			-Name and logo beside registration table.
										WAIVER: I hereby waive all claims against the Huntington's
SHOOTER'S REGISTRATION FORM WALK-IN SHOOTERS ARE WELCOME!									Disease Society of America, sponsors or any employee for any injury I might suffer in this event. I attest that I am physically fit	
HOW DO I SIGN UP TO BE A SHOOTER? Name										
To sign up to be a shooter, fill out the pledge form, get donations and BRING THIS FORM WITH YOU THE DAY OF THE EVENT. To reserve Address									and prepared for this event. I grant full permission for organizers to use photographs of me to promote this event.	
a time to shoot contact Ka	aty Simon at 614-58		<u></u> . 10 K							
email: khammond912@gmail.com			City	City,State, Zip						
Restrict donations to research only.				ne Ph		Cell Ph			Participant's Signature	
I am interested in learning more about volunteering My company has a Matching Gift Program.			Wor	rk PH						
I'd like the chapter newsletter by email.				Ema	ail					Parent/Guardian's Signature (if Participant is under 18)