

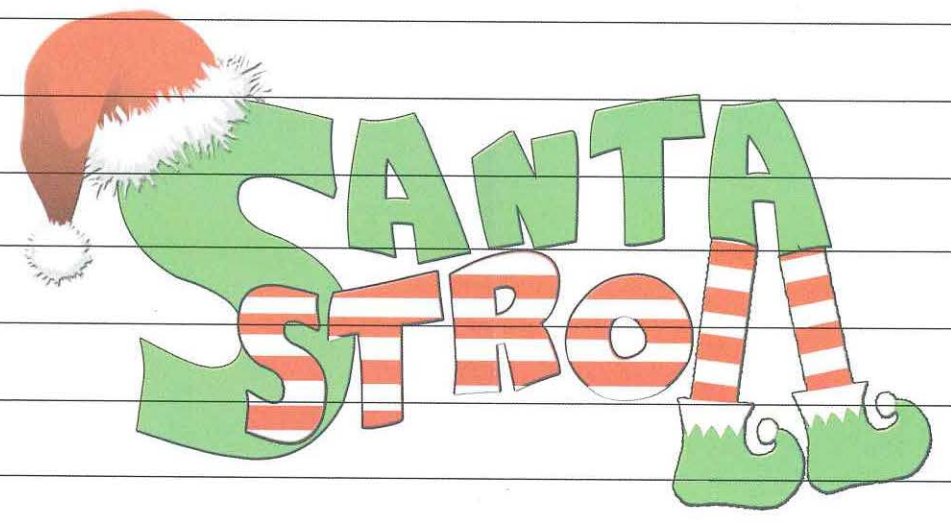
DONATION FORM

Receive a Santa Stroll 16 oz Tervis Tumbler when you raise \$200 or more!

WALKER'S NAME _____ DAYTIME PHONE _____ E-MAIL ADDRESS _____
 HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

SPONSOR'S NAME AND COMPLETE ADDRESS **DONATION COLLECTED**

John & Jane Smith	123 Main Street, Greenwood, SC 29649	\$50	<input checked="" type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
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_____	_____	_____	<input type="checkbox"/>



Company matching donation (please include all necessary forms/paperwork)

TOTAL \$ _____

Please make checks payable to
Hospice & Palliative Care of the Piedmont.
 We are your non-profit, community hospice.
 Thank you for your donation!

Donations to the Santa Stroll are tax deductible to the fullest extent provided by law. Receipts available upon request.

REGISTRATION FORM

Please fill out and mail
**ONE REGISTRATION FORM
 PER PARTICIPANT!**
 The day of the walk,
 bring your donation form (left),
 along with donations collected.



YOUR NAME _____
 HOME ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ E-MAIL ADDRESS _____

*T-Shirt Size: YL S M L XL XX-L

*T-Shirt guaranteed to entries received prior to November 3rd.

	Prior to November 3rd*	After November 3rd
Age 13 and over	\$25	\$35
Age 6-12	\$10	\$15
Age 5 and under	FREE	FREE

I am unable to walk, but would like to:

volunteer make a donation of \$ _____

Hospice & Palliative Care of the Piedmont
C/O Santa Stroll
408 West Alexander Avenue
Greenwood, SC 29646

I hereby waive all claims against Hospice & Palliative Care of the Piedmont and its affiliates, the sponsors of the Santa Stroll, volunteers and staff members of Hospice for any injury I (or my child) might suffer during the Santa Stroll. I grant full permission to Hospice & Palliative Care of the Piedmont to use photographs of me (and my child) for promotional purposes.

SIGNATURE (Parent or guardian if under 18) _____ DATE _____

Saturday, December 1st - Walk to support Hospice

Keep the care going, walk to raise money for Hospice & Palliative Care of the Piedmont. Remember loved ones no longer with us and honor all Hospice patients. Our 5K walk (3.1 miles) takes you from First Baptist Church through surrounding scenic residential areas... or try the one-mile fun walk.

Non-Profit
U.S. Postage
PAID
Greenwood, SC
29649
Permit No. 472

Registration

Prior to November 3rd:

\$25 - Age 13 and over

\$10 - Age 6-12

FREE - Age 5 and under

After November 3rd:

\$35 - Age 13 and over

\$15 - Age 6-12

FREE - Age 5 and under

RAISE	RECEIVE
> \$500	T-shirt, Santa hat, memory ribbons, Santa Stroll 16 oz Tervis Tumbler, PLUS 4" x 8" brick in the Hospice House Courtyard
\$200 - \$499	T-shirt, Santa hat, memory ribbons, PLUS Santa Stroll 16 oz Tervis Tumbler
\$25 - \$199	Hospice Walk T-shirt, Santa hat and memory ribbons

Registration fees count toward your total amount raised.

Wreath of Memories

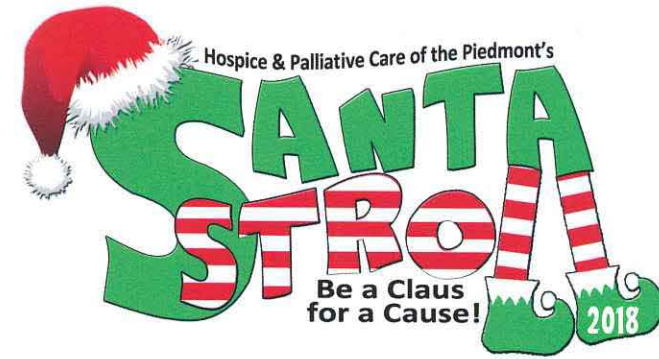
Registered walkers will receive two colored ribbons in memory or honor of your loved one - one to wear at the walk, and the other to tie onto the wreath. The memory ribbons will be red and the honor ribbons will be green to represent your loved one.



408 West Alexander Avenue
Greenwood, SC 29646



BEST COSTUME
wins a prize!



Saturday, December 1, 2018
FIRST BAPTIST CHURCH
GREENWOOD

Registration & Check-in 8:30am
Walk 9:00am

Santa hats provided!

*Thank you for supporting
Hospice & Palliative Care
of the Piedmont!*

Hospice & Palliative Care of the Piedmont is dedicated to being an innovative leader in providing hospice, palliative care & grief support to all who need it. The funds raised benefit Hospice & Palliative Care of the Piedmont patients and families.

408 West Alexander Avenue | Greenwood, SC 29646
864.227.9393 or hospicepiedmont.org