

2018 Crocker Walkathon

Participation Form

Due Fri. October 5th to classroom teachers

All walkers must be supervised by a responsible adult. This is not a drop off event.

_____ has my permission to
student name teacher gr.
participate in the Crocker Highlands' Walkathon, on **Saturday, October 13, 2018**
I understand that they will need to be supervised by a responsible adult.

Name of parent or guardian

Signature of parent or guardian

I will be attending the event. In case of an emergency, you can reach me at
_____ or _____ the day of the event.
cell number cell number

I will not be attending the event. My walker will be supervised by
_____.
name
They can be reached at _____ the day of the event.
cell number

