**19TH ANNUAL RYAN MOHN WALK SPONSOR SHEET**

**PARTICIPANT NAME: \_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please collect all donations (through cash or checks made payable to Ryan Lee Mohn Memorial Foundation) prior to the Walk. All money must be turned in at the registration table the day of the Walk. Reminder that all registrations must be received by August 5 to be guaranteed a t-shirt on the day of the Walk. Please print clearly. Use additional sponsor sheet if needed.

|  |  |  |  |
| --- | --- | --- | --- |
| **SPONSOR NAME** | **ADDRESS** | **PHONE #** | **DONATION $** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Waiver: I hereby waive all claims against the organizers of the Ryan Mohn Walk, the Ryan Lee Mohn Memorial Foundation, Steelton-Highspire School District, the Borough of Steelton, sponsors or personnel from coronavirus transmission or any injury that I may suffer from my participation in this event. I grant full permission for organizers to use photographs, video tapes, motion pictures, recordings, or any other record of this event in which I may appear for any legitimate reason.

Participant Signature & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/legal guardian if participant is under age 18