



# ALBANY PINK WALK

March 17, 2018 8:00 a.m.

Meredyth Place • 2709 Meredyth Dr • Albany

www.albanypink.com • info@albanypink.com

REGISTRATION FEES	Thru 12/31	1/1 - 2/28	After 2/28
Individuals	\$25 per person	\$35 per person	\$40 per person
Teams (4 or more)	\$25 per person	\$30 per person	\$35 per person

**FUNDRAISING GOAL**                    \$100 per participant  
     \$75 per participant (For Team Members of 4 or more)

Proceeds benefit local cancer patients of Phoebe Health System.

### WHAT IF I CAN'T RAISE \$100?

Any amount raised is money appreciated! No one will be turned away, but there are some awesome prizes...even if you aren't the top fundraiser! Our event goal is \$90,000, and you will help us get there! Every penny helps patients and their families, right here in our own neighborhoods!

### HOW LONG WILL THE EVENT LAST?

Registration and check-in will begin at 8:00, with snacks and an opening ceremony at 9:30 to honor survivors prior to our first steps at 10:00. **LEARN MORE OR REGISTER AT [www.albanypink.com](http://www.albanypink.com)!**

## ALBANY PINK REGISTRATION FORM

c/o Phoebe Foundation • 425 Third Ave W Ste 220 • Albany GA 31701

**\*\*Please make checks payable to PHOEBE FOUNDATION\*\***

Participant: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Team Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Please charge my:     MasterCard             Visa             American Express             Discover

Card # \_\_\_\_\_ Expiration \_\_\_\_\_ Verification Code \_\_\_\_\_

Print Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

In honor or memory of \_\_\_\_\_