



With special thanks to our underwriters:

Together we can make our homes and streets safer!



5th Annual Benefit for Elizabeth Freeman Center



# Walk a Mile in Her Shoes

Men's March to Stop Rape, Sexual Assault & Gender Violence

## Third Thursday, September 17, 2015

5pm register, 6pm walk (Rain or Shine)

Take a Stand.  
Walk the Walk.

**NEW LOCATION:**  
Corner of North St.  
and Columbus Ave.,  
Pittsfield



For more information, to raise money or register online, go to [www.elizabethfreemancenter.org](http://www.elizabethfreemancenter.org) or call 413-499-2425.



# Walk a Mile in Her Shoes®



**WANTED: Men, boys, family, and friends who want to stamp out domestic and sexual violence!**

- Walk the one-mile walk in "her shoes"
- Shoes and shoe decorations available at the event or bring your own

For more information, or to register and raise money online, go to [www.elizabethfreemancenter.org/events/wam](http://www.elizabethfreemancenter.org/events/wam) or call us at 413-499-2425.

Walker's name \_\_\_\_\_ Email \_\_\_\_\_

Walker's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Organization/Company name \_\_\_\_\_

Donor name(s)	Email	Pledge Amount	PAID
<b>Checks payable to: Elizabeth Freeman Center, Inc.</b> (All donations are tax deductible) <b>\$55 in pledges guarantees walker an event t-shirt</b>		<b>GRAND TOTAL:</b>	

Waiver: As a participant in the Elizabeth Freeman Center's walk, I hereby for myself and my executors, administrators, personal representatives, heirs and assigns, assume any and all risks which might be associated with the event. I further release and discharge the Elizabeth Freeman Center, Inc., its officers, directors, and members, and the sponsors, organizers, volunteers, and other representatives of the event, and their successors and assigns, for any and all claims for injury, damages, demands and causes whatsoever in any manner arising from or related to my participation in the event and any related activities. I agree to the use of any photographs, film or videotape of the event for any purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent signature (if participant is under 18): \_\_\_\_\_