



WALK REGISTRATION IS FREE!

- **REGISTRATION BEFORE THE WALK:** Register online at www.caplakecounty.org or mail to CAP-Walk, PO Box 9059, Waukegan IL 60085 or drop-off at CAP office, 2424 Washington St., Waukegan IL 60085
- **START/END LOCATION:** **Sherman Avenue Community Resource Center** , 1906 Sherman Ave. North Chicago, IL 60064
- **REGISTRATION/CHECK-IN:** 8:30am-9:30am/Registration closes 30 minutes prior to **WALK & RALLY** begins at 9:30am.
- **COURSE MAP:** Starting at 1906 Sherman Ave headed east down Argonne, turning north (left) on to Jackson to 14th street (East/left) to Audrey Nixon Blvd up to Lewis Ave (left/south) back to 1906 Sherman Ave (see map on other side)

WALK BEGINS: 10:00 am

RELEASE AND WAIVER OF ALL CLAIMS

Sign, tear-off and submit Release and Waiver when registering by mail, at the CAP office or bring it with you during check-in!

AGREEMENT REGARDING RISK OF INJURY AND RELEASE—RELEASE AND WAIVER OF ALL CLAIMS

I hereby apply to participate in the **Community Action Partnership of Lake County 15^h Annual Anti-Poverty Why I Walk 2024** that will begin at **1906 Sherman Ave , North Chicago IL 60064 on Saturday, May 4, 2024.**

I understand that participating in the Walk will expose me to above normal risks of harms. These risks include uneven grounds, weather elements, vehicles, collisions with other participants or unforeseen spectators or objects that may be along the route.

I represent that I have no health or physical problems that will interfere with my participation in the Walk.

I agree that I am responsible for my own safety.

I hereby assume all risks associated with my attendance and participation in the Walk. I understand that I am solely responsible for any injuries which may occur to me as a result of my participation in the Walk and I specifically waive my right to bring litigation against the sponsors and specifically release any right which I have to assert a negligence claim against the Walk sponsors, their agents or representatives.

I hereby fully and forever release, discharge, and agree not to sue Community Action Partnership of Lake County, Community Action Foundation of Northern Illinois, Local Walk Organizers, Local Business Sponsors, Site Owners, any other sponsors (hereafter called "Walk Sponsors") their officers, directors, agents, employees, representatives, and successors for any and all claims, causes of action or liability for any injury, loss or damage sustained or incurred by me arising out of or in any way associated with my attendance at or participation in the Walk, including all claims, causes or action or liability arising out of the negligence of Walk Sponsors, their agents or representatives.

I grant full permission for organizers to use photographs, video and quotations from me in legitimate accounts and promotions of this event.

I agree to indemnify and hold harmless Walk sponsors, their agents or representatives from any loss, damage or expense sustained or incurred by them arising from any such claims, cause of action or liability, whether brought to me, anyone acting on my behalf, or by anyone else because of conduct attributed to me.

I agree that this agreement shall be construed and interpreted according to the law of the State of Illinois.

I understand and agree that this Release and Waiver shall be binding upon my heirs, assigns and any personal entity acting upon my behalf, including a parent, guardian or next friend.

I have read the above items of the Release and Waiver, understand them, agree to abide by them, and hereby acknowledge that I have read and understand this Release and Waiver. Each family member must sign a separate form to participate:

Participant Name: _____ Phone: _____

Address: _____ Email: _____

City/State/Zip: _____ Male: _____ Female: _____

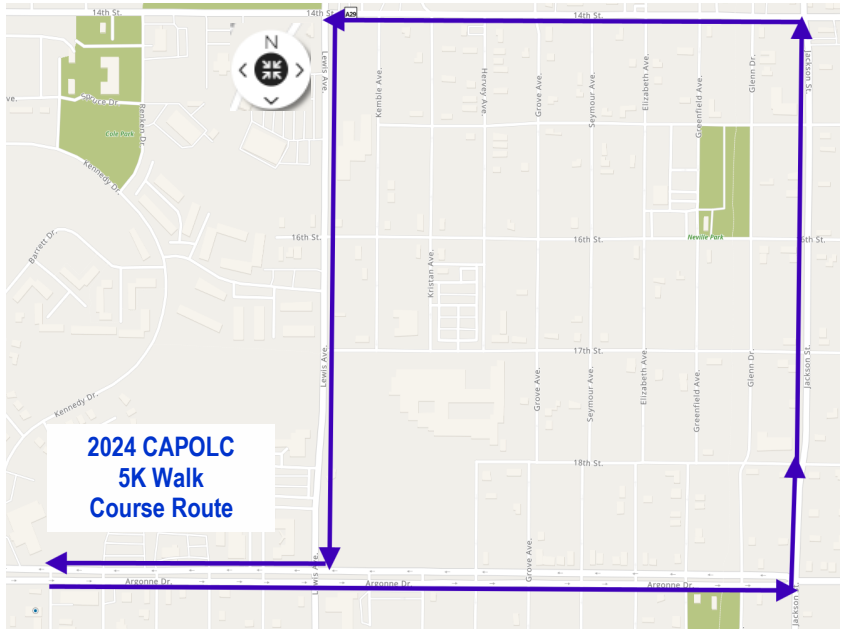
Signature: _____ **Walk Shirt Size (circle): 4XL 3XL 2XL XL LG MED SM**

Signature of parent or guardian if under 18 years old: _____ **DATE:** _____

For the past 60 years, CAP of Lake County, a nonprofit organization, has been running programs aimed at helping low-income families. These programs include the Low-Income Home Energy Assistance Program (LIHEAP), Youth and Family Services (Emergency Assistance, Food Pantry, and Medical Assistance), Weatherization, and Affordable Housing.

Proceeds support the following CAP of Lake County programs:

The Hot Meals Program by CAPOLC has been providing more than 9,500 hot meals to Seniors in low-income housing. Our goal is to continue the program until the end of the year, and we need your support to achieve this goal. We are looking to raise enough funds to provide 300 meals every week. We urge our supporters to come forward and help us in raising the required funds for the 2024 hot meals program. You can become an event sponsor, a walker or donate individually to support this cause.



The Walk will begin at 1906 Sherman Ave. and head east down Argonne Dr. Then, turn left onto Jackson St and head north until reaching 14th St. From there, head east (left) towards Audrey Nixon Boulevard and continue until reaching Lewis Ave, where you will turn left (south). Finally, head back to 1906 Sherman Avenue to complete the Walk.

If you would like to make a donation, please bring donation with you at check-in.

PLEDGE FORM

First Name: _____ Last Name: _____

Team Name: (if applicable) _____

I plan to walk the entire course for Community Action Partnership of Lake County.

Dear Potential Pledge Sponsor,

I am participating in the **CAP of Lake County’s 15th Annual Anti-Poverty 5K Walk 2024**. You can sponsor me for an amount of your choice. Donations collected when you sign up. Make checks to: Community Action Partnership of Lake County. All contributions are tax-deductible. Please provide address for thank you note.

No	Name of Pledge Sponsor	Address, City, ST & Zip <u>OR</u> email	Pledge Amount (Example: \$1.00)	Amount Collected from Sponsor	Business Matching Pledge Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
TOTALS					

Walk Participants: To reach our funding goals, we hope that each participant finds sponsors. We’re hoping to make this Walk the best ever, so the more contributions you raise; the more successful we’ll be at achieving our goal. Please bring this form and collections with you prior to the event or bring to the event. Thank you very much for your participation! We look forward to all our participants having a great time! For questions, call Marsha Belcher at 847-249-4330 or email marsha.belcher@caplakecounty.org



Community Action Partnership of Lake County

Save the Date

Celebrating 60 Years of Community Action

2024 May is National Community Action Month, is dedicated to recognizing the success of the national Community Action Network that fights poverty across the United States. Community Action Agencies will celebrate over **60 years of service** in our communities. Funding raised will continue the Hot Meals Delivery Program for Seniors in low-income housing:

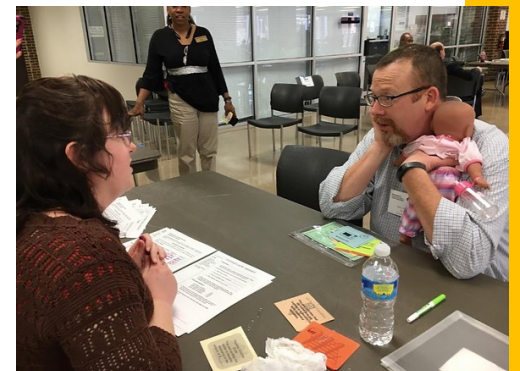
- ◆ 15th Anti-Poverty 5K Walk — May 4th
- ◆ Health & Wealth Resource Fair — May 17th
- ◆ Report to the Community & Partner Recognition Reception — June 1st

SIGN-UP TODAY!

To Get Involved! Visit www.caplakecounty.org/events.html for 5K Walk Registration/Pledge forms, Reception Tickets sign-up.

For more details, email Marsha Belcher at marsha.belcher@caplakecounty.org.

5K Walk Registration & Reception Tickets available!



SCAN ME



MAY
17th
2024

10 am—1 pm

HEALTH, WEALTH & RESOURCE FAIR

Community Action Partnership
of Lake County

2424 Washington St. Parking Lot
Waukegan, IL 60085

For more information email
marsha.belcher@caplakecounty.org

This is a free event, designed to provide resources for a healthy lifestyle, financial awareness, and community outreach.



Mental Health

Healthy
Heart

Self-Care

RESOURCES

Community Action Partnership of Lake County

Rent Payment Assistance

Prescription Eyeglasses

Mortgage Payment Assistance

Medical Bills Assistance

Water/Sewer Bill Payment Assistance

Home Weatherization

FREE FOOD PANTRY





REPORT TO THE COMMUNITY & PARTNER RECOGNITION RECEPTION

COMMUNITY ACTION MONTH 2024



Join us celebrate the accomplishments of
Community Action Agencies and
Community Action Partnership of Lake County,
as well as publicly recognize our local partners at our

Report to the Community & Partner Recognition Reception

Saturday June 1, 2024 @ 11:00 am - 1:00 pm

CAP Catering Banquets, 206 N. Genesee St., Waukegan

CLICK HERE TO PURCHASE TICKETS—\$50.00 PER PERSON

<https://www.caplakecounty.org/events.html>





Community Action Partnership of Lake County Celebrating 60 Years of Community Action

SPONSOR LEVELS

MAY is National Community Action Month!

Community Action Partnership of Lake County is celebrating Community Action Month 2024, dedicated to recognizing the success of the national Community Action Network that fights poverty across the United States.

This May, CAP of Lake County will showcase our anti-poverty work during the following events:

15th Anti-Poverty 5K Walk, Saturday – May 4th

Health & Wealth Resource Fair – May 17th

Report to the Community and Partner Recognition Reception – June 1st

2024 Fundraising Impact:

This year's proceeds from this event will support the Hot Meals Delivery Program for seniors living in low-income housing and Veterans Supportive Services in Lake County. It's a noble cause and will positively impact the community.

Sponsor Benefits: Sponsors* will be featured on outdoor signage during National Community Action Month in May at our main office and event locations, in the social media and website campaigns.

Sponsor Levels and Benefits:

Community Action Month Supporter Sponsor receives:

- Recognized at all CA Month events; event posts on social media, CAP of Lake County E-News Announcements
- Prominent company banner at the Walk
- Signage at Reception (Your own pull-up banner or we will generate signage)
- Prominent company logo on Walker t-shirts
- Full page color advertisement in 2024 Report to the Community Booklet
- Reception - Table for 8 guests
- (10) T-shirts for company staff participating in the Walk, Opportunity to contribute company information/product in Walk swag bags and Reception thank you bags

\$1,500.00

Partner Table Sponsor receives:

- Recognized at the Reception, 5K Walk, CAP of Lake County E-News Announcements
- Signage at Reception (Your own pull-up banner or we will generate signage)
- Full page color advertisement in 2024 Report to the Community Booklet
- Reception - Table for 8 guests
- (8) T-shirts for company staff participating in the Walk
- Prominent company logo on Walker t-shirts

\$1,000.00

Walk Sponsor receives

- Joint recognition on banner during CA Month
- Company logo on Walk participant t-shirts
- Recognized at the Walk and on social media during the event
- Recognition in CAP of Lake County E-News Announcements
- Half-page color ad (4"x10") in 2024 Report to the Community Booklet
- (5) T-shirts for company staff participating in the Walk

\$500.00

T-Shirt Sponsor receives:

- Company logo on Walk participant t-shirts
- (2) T-shirt for company staff participating in the Walk

\$200.00

Cash Donation

If your schedule prohibits you from attending, please consider a donation. All sponsor, registration and lunch-in payments

DUE BY 4/5/2024



Community Action Partnership of Lake County Celebrating 60 Years of Community Action

SPONSOR FORM

Sponsor Level: *(Please check box that applies)*

Community Action Month Supporter Sponsor (\$1,500.00)

Partner Table Sponsor (\$1,000.00)

Walk Sponsor (\$500.00)

T-Shirt Sponsor (\$200.00)

Donation: please list amount _____



Online Payment: Visit <https://www.caplakecounty.org/events.html>, select a sponsorship and pay by **Thursday, April 05, 2024**.

SPONSORS must submit logo by April 5, 2024 for shirt order, send to capoflakecounty@caplakecounty.org

Advertisements must be submitted by April 5, 2024 in either a jpeg or pdf format to capoflakecounty@caplakecounty.org

Mailing Payment: Use this form and send payment by **Friday, April 5, 2024** to Community Action Partnership of Lake County,
PO Box 9059, Waukegan, IL 60079-9059, Attention: Community Action Month 2024

Business Name: _____ City/State/Zip: _____

Contact Name: _____ Fax: _____

Address: _____ Email: _____

Number of Sponsored Walkers attending: _____ Phone: _____

Number of Walk Shirt Sizes Needed (insert number on the line): ___ 4XL ___ 3XL ___ 2XL ___ XL ___ L ___ M Child size: ___ L ___ M ___ S

Total amount of payment/donation enclosed: \$ _____ (Please make checks payable to Community Action Month 2024)

Payment Method: Cash Check Credit Card: Visa MasterCard American Express Discover

Name on card: _____ Card number: _____ Exp. Date: _____ Code: _____

Signature: _____

Billing Address (if different from above):
